MAINE OFFICE OF STATE FIRE MARSHAL

REQUEST FOR INVESTIGATIVE REPORT

If you wish to request component(s) of an investigative file beyond the investigative report you are currently requesting, please attach and forward with this form a letter specifying which component(s) you wish to request. Please note that additional fees will be charged for any such other component(s) that are provided.

PLEAS	<u>SE PRINT</u>			<u>FORM #1</u>
			REQUESTOR INFORMATION:	
1	Full name:			
2	Mailing address: (P.O. Box,City/			
3	Code) Street address: (Street City/Town, Zip Code)			
4	Telephone number:	()		
5	E-mail address:			
11	List property damaged or destroyed in incident:			
	INF	ORMATION REGA	RDING THE INCIDENT THAT IS THE SUBJECT OF THE REQUESTED	REPORT:
12	Incident date:		Incident location:	
13	Brief description of incident (including, if available, names/DOB of individuals involved):			
14	Incident number (if known):			
15	I am requesting this incident investigation report (check <u>one</u>): □For myself □On behalf of (full name):			
16	I am requesting this incident report for the following reason(s):			
	IFY THAT, TO) THE BEST OF MY K	NOWLEDGE AND BELIEF, THE INFORMATION I HAVE PROVIDED ABOVE	E IS CORRECT.

NOTE: OFFICE OF STATE FIRE MARSHAL INCIDENT INVESTIGATION REPORTS ARE CONFIDENTIAL AND MAY NOT BE RELEASED TO THE PUBLIC IF THERE IS A REASONABLE POSSIBILITY THAT DOING SO WOULD RESULT IN CERTAIN CONSEQUENCES IDENTIFIED IN APPLICABLE STATE LAW. SEE 1 MRS § 402(3)(A); 16 MRS § 804. ACCORDINGLY, PLEASE NOTE THAT THE OFFICE OF STATE FIRE MARSHAL MAY BE PROHIBITED FROM RELEASING TO YOU THE REPORT YOU HAVE REQUESTED FROM OUR AGENCY. COMPONENTS OF REQUESTED REPORTS MAY BE REDACTED OR EXCLUDED IN ORDER TO COMPLY WITH MAINE AND FEDERAL STATUTES.

PLEASE SEND THIS COMPLETED REQUEST FORM ALONG WITH A \$10.00 CHECK OR MONEY ORDER, PAYABLE TO THE TREASURER, STATE OF MAINE, FOR EACH REPORT BEING REQUESTED TO: OFFICE OF STATE FIRE MARSHAL, 52 STATE HOUSE STATION, AUGUSTA, ME 04333-0052.