**REQUEST FOR REPORT RELATED TO**



**FIRE OR CARBON MONOXIDE INCIDENT**

**Requestor’s Information:**

Name: Click here to enter text.

E-mail Address: Click here to enter text.

Mailing Address: Click here to enter text.

Phone Number: Click here to enter text.

**Information Request:**

In order to expedite your request, please provide as much of the following information as possible regarding the record that you are seeking:

Type of Report (Please indicate by marking the appropriate box):

[ ]  Fire Investigation Report

[ ]  Fire Incident Report (otherwise known as Fire Run Report)

[ ]  Carbon Monoxide Investigation Report

[ ]  Other - Click here to enter text.

Address/Location of Incident: Click here to enter text.

Date of Incident: Click here to enter text.

Approximate Time of Incident: Click here to enter text.

Additional Relevant Information: Click here to enter text.

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**Please note - for requests made under the Maryland Public Information Act, the Baltimore City Fire Department is required to redact medical or psychological information, except if the record is requested by a person in interest, yourself, or a person you have the legal authority to represent. *See* Md. Ann. Code, General Provisions Art., § 4-329.**

**Please return this form to:** Amy Beth Leasure, Chief of Legal and Regulatory Affairs

 BCFDMPIA@Baltimorecity.gov

 401 E. Fayette Street, Mezzanine Level

 Baltimore, MD 21202