

# FIRE INVESTIGATION REPORT REQUEST



**San Bernardino County Fire Department**  
**Community Safety Division**  
**620 South 'E' Street, San Bernardino CA 92415-0153**  
**(909) 386-8400 Phone • (909) 386-8460 Fax**

## REQUESTOR INFORMATION

DATE OF REQUEST	REPORT TO BE:    PICKED UP <input type="checkbox"/> MAILED <input type="checkbox"/> FAXED <input type="checkbox"/> EMAILED <input type="checkbox"/>				
NAME		TITLE (If individual, leave blank)		COMPANY or AGENCY (If individual, leave blank)	
MAILING ADDRESS			CITY/COMMUNITY		STATE    ZIP CODE
PHONE		FAX		EMAIL ADDRESS	

## INCIDENT INFORMATION

(Please include as much information as possible)

INCIDENT NUMBER	TYPE OF FIRE (Structure, vehicle, vegetation, etc.)	DATE OF FIRE	INVESTIGATOR
LOCATION OF FIRE		CITY/COMMUNITY	
		STATE	ZIP CODE
		<b>CA</b>	

**Please remit a fee of \$28.00 for each Fire Investigation Report requested.**  
**(Reports will not be released until fee is paid)**

**Please use checks or money orders ONLY, made payable to "SBCFD".**

**Government agencies shall remit an appropriate fee based upon current Memorandums of Understanding.**

Fire Investigation Reports (FIRs) will become available after a minimum of two weeks following the closure of an investigation. FIRs cannot be released until a case has been closed.

In the event that a case has been closed but has been referred for prosecution or other formal enforcement action, FIRs cannot be released unless the case has been fully adjudicated, including appeals. **EXCEPTION:** An FIR shall be released upon proper service of a Subpoena Duces Tecum or other bonafide court order.

The FIR will include the written document (hard copy of the report) with any associated photographs in a CD-ROM format. Please note that ALL confidential information will be redacted or otherwise removed prior to issuance of an FIR.

## OFFICE USE ONLY

DATE OF RECEIPT	RECEIVED BY	DATE OF ISSUANCE	ISSUED BY
CHECK/MONEY ORDER NUMBER	RECIEPT NUMBER	INVOICE #	DATE INVOICE MAILED    DATE INVOICE PAID