Cedar Rapids Fire Department
Fire Marshal's Office

Office Phone (319) 286-5166 Fax (319) 286-5250

Request for Information / Site Assessment

Date of Request: _____/_____/_____

Description of Site:

Name of Business_____

Address of Business_____

Comments_____

_____

Information on Requestor:

Name of Business_____

Address_____

Person Requesting Information_____

Phone #_____ Fax #_____

E-Mail Address_____

Site Assessment Fee of $30.00 per address site includes a search of Fire Dept. records for the most recent inspection information, emergency response calls (i.e. hazmat spills, etc.), and permits issued (i.e. installation and removal of underground and aboveground storage tanks, etc.)

Please complete this form and make the check payable to *City Treasurer,* and send both to:

CRFD—Fire Marshal's Office
713 1st Ave. SE
Cedar Rapids, IA 52401

Notes**:** _____