



**PRINCE WILLIAM COUNTY
DEPARTMENT OF FIRE AND RESCUE
OFFICE OF THE FIRE MARSHAL**

Date of Request: _____

In accordance with the Virginia Freedom of Information Act (§ 2.2 -3700 et seq.) I am requesting the following records:

Incident Date: _____ **Approximate Incident Time:** _____

Address / Location: _____

Incident Description: _____

Information Requested: _____

The type of document(s)/report(s) that I am requesting is/are:

FOIA TYPE	COST	QUANTITY	TOTAL
Fire Incident Report	\$8.00		
Photos	\$5.00		
Fire Marshal Report for Cause and Origin (if applicable)	\$8.00		
Due Diligence (Fire Code Violations - fee is per address)	\$30.00		
Environmental Assessments (Hazmat, A/G Tank Inquiries)	\$50.00		
Other (ex. Copies of plans)	\$30.00		
TOTAL:			

*All fees are due upon receipt. Fees are waived when requested by owners, property managers or government agencies.

I would also like to request that all charges for supplying the records I have requested be estimated in advance. I understand that if you determine that the charges are likely to exceed \$200, I am obliged to pay that amount before you continue to process my request.

If you have any questions or require additional information to process my request, please do not hesitate to contact me at:

Requestor Name: _____

Company (if applicable): _____

Address: _____

Phone Number: _____

Email: _____

Signature: _____

Please email completed form to
PWCFMOFOIA@pwcgov.org