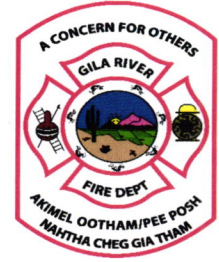




Gila River Fire Department
 5002 N. Maricopa Road
 P. O. Box 5083
 Chandler, AZ 85226
 (520) 796-5900 Phone (520) 796-5919 Fax



INFORMATION RELEASE FORM

To request incident reports please fill out the following information. The Gila River Fire Department will only answer requests for information submitted in writing and approved by the Fire Chief. The Gila River Fire Department will respond to all requests for information within fourteen working days.

Name of person/Agency requesting information: _____

Phone #:() _____ Fax#:() _____ Email: _____

Date of request: _____

Date of incident: _____ Time of Incident: _____

Location of incident: _____

Incident # if known: _____

Reason for request: _____

Department use only:

Date received: _____ Identification: _____

Shift on duty: _____ Date due back to requester: _____

Second Request: _____ Date due back to requester: _____

Fire Chief/Chief Officer Approval: _____ Date: _____