



Fairview Fire District

258 Violet Avenue

Poughkeepsie, New York 12601

Tel: (845) 452-7453

Fax: (845) 452-0552

REQUEST FOR INFORMATION

TO: FAIRVIEW FIRE DISTRICT

I hereby apply to inspect or receive a copy of the following records:

- _____ 1. Fire Report - Date of Incident: _____
- _____ 2. E.M.S. Report - Date of Incident: _____
- _____ 3. Other - Explain: _____

Description of record requested, date, time, location, etc.:

(Medical records are not obtainable without a signed notarized signature of person listed on record. SEE REVERSE SIDE FOR NOTARY PUBLIC ACKNOWLEDGEMENT)

Person Requesting Above Information:

DATE: _____

NAME: _____
(Signature)

(Print Name)

MAILING ADDRESS: _____

PHONE NUMBER: _____

REPRESENTING: _____

PROOF OF IDENTIFICATION: _____

FAIRVIEW FIRE DISTRICT USE ONLY:

Approved by: _____ Title: _____ Date: _____

