DEPARTMENT OF PUBLIC SAFETY DIVISION OF FIRE SAFETY INSPECTION UNIT



205 Jefferson St., Ste. 1315 Mailing Address: PO Box 844 Jefferson City, MO 65102-0844 Phone: (573) 522-6207 Fax: (573) 526-5971

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FIRE DEPARTMENT NOTIFICATION

The purpose of this form is to expedite your licensing/inspection process and to provide notification to your local fire department of your facility's operation in their service area, for pre-planning purposes, in case of an emergency response.

- Please request the fire department or fire district that provides fire protection to your location complete the information in the lower section.
- This form is required for licensing and <u>must be completed and on file at the</u> <u>facility before the State Fire Inspector arrives</u> to conduct the inspection.

TO BE COMPLETED BY PROVIDER	
Name of Facility/Provider	
Address	
Phone Number	Capacity Requested
Administrator	
Projected Date of Opening	
TO BE COMPLETED BY LOCAL FIRE DEPARTMENT	
This is NOT a request for inspection. This is only to inform you of the operation of this facility within your district.	
Department Name	
Address	
Signature of Fire Official	
Date	Phone