



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 **must be completed and on file at the facility before the State Fire Inspector arrives** 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	
<p><i>This is NOT a request for inspection.</i></p> <p><i>This is only to inform you of the operation of this facility within your district.</i></p>	
Department Name	
Address	
Signature of Fire Official	
Date	Phone