

City of Madison Fire Department

314 W. Dayton St., Madison, WI 53703-2506

Phone: 608-266-4420 • Fax: 608-267-1100 • E-mail: fire@cityofmadison.com



*** RECORDS RELEASE REQUEST ***

In order to more efficiently process your records release request, please complete this form. This request shall be answered as soon as practicable.

Records are billed at \$0.02/side (B&W), \$0.07/side (color), plus postage, if applicable. Additional charges may apply for USB drives and/or location fees. There is no charge for emailed records.

TO:	City of Madison Fire Department, Attn: Records 314 W. Dayton St., Madison, WI 53703		
FROM:	Company	SEND TO:	Company
	Company		Company
	Name	_	Name
-	Address	_	Address
	City, State ZIP	_	City, State ZIP
	Phone Number	_	Phone Number (FAX) or E-mail address
Plea	se send request via: U.S. Mail	FAX	Pick-up E-mail
Request	is being made for a copy of the follow	ving Madison Fire	Department record(s):
Date of Inc	icident Incident Number Cla	laim No. (if applicable)	Address of Incident
Date of Inc	icident Incident Number Cla	laim No. (if applicable)	Address of Incident
Other Records: (Please provide a brief description of the records sought):			
Date:	Signature:		
Assigned ⁻		NTERNAL USE ONLY	~
	case file Pending criminal prosecution Active investigation Sensitive nature of investigation Juvenile record Not complete Other	Sen	case file nd original version nd redacted version Personal/medical information Juvenile information Safeguard informant Other