



FIRE/ INCIDENT REPORT REQUEST FORM

Instructions: Please complete this form in its entirety. This request does not guarantee a copy of any information requested. The County of Maui reserves the right and has the discretion to release any and/or all information in compliance with the State of Hawaii Office of Information Practices. There may be a charge as indicated in the Maui County Code, Section 2.64.010, Fee Schedule for Public Records. Applicable reports will be sent via email. If you would prefer to receive applicable reports via USPS mail, please include a self-addressed, pre-posted envelope. Completed forms may be submitted by one of the following methods.

Email: fire.dept@mauicounty.gov

OR

Mail: Maui Fire Department
200 Dairy Road
Kahului, HI 96732

SECTION I. REQUESTOR INFORMATION

Name: _____ Phone: _____ Email: _____

Relation to the Incident: Victim Insurance Carrier Media Other _____

Agency or Firm: _____

SECTION II. INCIDENT INFORMATION

Date: _____ Time: _____ Location: _____

Type of Incident: Fire Rescue Medical Other _____

SECTION III. FIRE/ INCIDENT REPORT

- Emergency Response Crew Report (NFIRS)
- Fire Investigation Report from the Fire Prevention Bureau*
- Compact Disc (CD) of Scene Photos** **Fee: \$10.00**

Please make checks payable to the Maui Fire Department.

*Report will only be available if a Fire Inspector was dispatched to the scene.

**Compact Disc (CD) may not be available.

SECTION IV. REQUESTOR SIGNATURE

Print Name

Signature

Date

FOR OFFICE USE ONLY:

Date Received: _____

ERC Report Sent to Requestor: _____

RFLS Sent to Corp Counsel: _____

FPB Report #: _____

UIPA Log: _____

FPB Report Sent to Requestor: _____