## PERKIOMEN TOWNSHIP REQUEST FOR FIRE MARSHAL

1 TRAPPE ROAD COLLEGEVILLE, PA 19426 610-489-4034 (PHONE) 610-489-4918 (FAX)

	TC	OWNSF	IIP I	USE ON	LY				
Date Received: / /									
Time:		Received	Ву:						
			/51						
NAME & ADDRESS OF	REQU	ESTER	(Pl	ease Pri	int Legil	oly)			
Name:									
Company / Business / Agend	cy Name	:							
Address:									
Phone Number:									
Email Address:									
									_
REQUEST (Check App	ropriate						1		
Fire Investigation Report: (	( )	Hard C	ору:	( )	Electro	nic Copy	: ( )		
Fire Scene Pictures:	5x7's	(	)	8x10's	( )	Flash	n Drive	(	)
SIGNATURE REQUIRE	D								
By signing below, I agree that I, or		any husine	288 0	r agency wi	ll not dissen	ninate or re	enroduce the	Report	
and/or any Scene Photgraphs with								rtoport	
Signature:					Date:				
FEES FOR FIRE SERVIC	ES PER	PERKI	OM	EN TOW	NSHIP F	EE SCH	IEDULE		
Fire Investigation Reports (Har	d Copy or	Electron	ic): \$	35.00					
Pictures Printed on Photo Stoc	k: 5x7 Ph	oto's @ \$	20.0	0 Each / 8	3x10 Photo	o's @ \$22	.00 Each		
Flash Drive of Fire Investigation	n Pictures	and/or V	ideo:	\$110.00					
FEES TO BE PAID WITH SUBMIT	TAL. IF RE	EQUESTIN	G PHO	то ѕтоск	PICTURES,	PLEASE C	ALL FOR TO	TAL FEE	
FIDE MADOUAL DEOD	ONOF	50 DE 6	\	OT					
FIRE MARSHAL RESPO	Ī						T		
Sent: / /				:: Hard Co	py or Elec	ctronic			
Fees Paid: \$		Remark	s:						