

CITY OF COLUMBUS
COLUMBUS DIVISION OF FIRE
3639 PARSONS AVENUE
COLUMBUS, OHIO 43207
614-724-0829
614-645-4204 FAX



THE CITY OF
COLUMBUS
ANDREW J. GINTHER, MAYOR

DIVISION OF FIRE

PUBLIC INFORMATION REQUEST FORM

(The following information must be completed for all types of public requests)
Please print or type

Name: _____ Date of Request: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

Type of Records requested:

- ☐ Fire Incident Report
- ☐ EMS Patient Care Report (Please call 614-645-7384)
- ☐ Arson Investigation Report (Please contact ARSON at 614-645-3011)

Date of Incident: _____

Address of Incident: _____

(This section to be completed by Division of Fire Personnel Only)

Section Responsible for Records _____

Request completed by _____ **I.D. Number** _____

Dated Mailed _____ **(or) Date picked up** _____ **(or) faxed** _____

(or) Date emailed _____