

# **Request for Incident Related Information**

#### All communications to be addressed to:

State Operations NSW Rural Fire Service Locked Mail Bag 17 GRANVILLE NSW 2142 Fax: (02) 8741 5550

Email: riri@rfs.nsw.gov.au

## **Applicant's details**

Contact Name:	Company / Organisation name:	
Phone Number:	Email:	
Postal Address:		
Suburb & State:	Postcode:	
Your Reference number:		

## **Incident details**

Date of Incident:	Time of Incident:	
Location & Address of incident:		
Suburb & State:	Postcode:	
Type of incident: (e.g. House fire)		

### **Details of Owner/Occupant**

Owners/ Occupants Name:			
Owners/Occupants Address:			
Postal Address:			
Suburb & State:	Pos	stcode:	
Notes: Please use this space to add additional information to assist in processing your request.			

I certify that permission has been obtained from all persons affect by the incident whose personnel information may appear on the NSW Rural Fire Service incident report related to this incident and for that information to be given as part of my inquiry into the incident.

## PLEASE EMAIL THIS COMPLETED FORM TO riri@rfs.nsw.gov.au

### **RFS USE ONLY**

Received:		File Number:	Doc Number:	
BIRS	YES NO	Incident Number:		
FICU	YES NO	Ref:		