

# Request for Copy of a Fire Investigation Report

Office of State Fire Marshal will determine if the report is available for release, calculate the cost of providing a copy of the report, and contact you with instructions for submitting payment.

**Mailing address:** Office of State Fire Marshal  
Fire & Life Safety  
4760 Portland Rd NE  
Salem OR 97305-1760

**Contact:** Sandi McClaghry  
**Email:** sandi.mcclaghry@state.or.us  
**Phone:** (503) 934-8256  
**Fax:** (503) 373-1825

The Submit button works with Adobe Acrobat Pro 9. If you do not have this version, you may mail, email, or fax your request

## Information Requested:

Date of fire \_\_\_\_\_

County where the fire occurred \_\_\_\_\_

Address where fire occurred(street) \_\_\_\_\_

(street) \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

Responding Fire Department \_\_\_\_\_

Owner/occupant of structure that burned \_\_\_\_\_

**Date of this request:**

## Send Information To:

**Name** of person requesting a copy of a fire investigation report \_\_\_\_\_

**Name** of Business (if applicable) \_\_\_\_\_

**Mailing Address** street \_\_\_\_\_

street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

## For Office Use Only:

**Report Number** \_\_\_\_\_

**Date Report Mailed** \_\_\_\_\_

**Fee Amount** \_\_\_\_\_

**Date Fee Received** \_\_\_\_\_