

BRICK TOWNSHIP BUREAU OF FIRE SAFETY
500 Herbertsville Road
Brick, New Jersey 08724
732-458-4100
FAX: 732-458-4153
www:brickfire.org



REQUEST FOR FIRE REPORTS

Date _____

Name _____ Phone No. _____

Company Name (if applicable) _____

Street Address _____

City _____ State _____ Zip Code _____

Date of Fire _____ Case # _____

Address of Fire _____

Type of Fire Report Requested and Fee: (please check)

*Fire Company Incident Report _____

Fee Received \$ 5.00 Check No. _____ Receipt No. _____

*Fire Bureau Investigation Report _____

Fee Received \$15.00 Check No. _____ Receipt No. _____

Signature

Date

Print Name