



Investigation Report Request Form

Nevada State Fire Marshal Division
107 Jacobson Way
Carson City, NV 89711
Phone: (775) 684-7510 – Fax: (775) 684-7518
Email: pmilton@dps.state.nv.us

How would you like to receive your report: Mail Email Fax

Other (explain): _____

First Name: _____ Last Name: _____

Company Name (If applicable): _____

Mailing Address: _____

Primary Contact Phone: _____ Fax: _____

Email Address: _____

Report Details

Date of Fire: _____

Computer Aided Dispatch Number (CAD#, if available): _____

Address of Fire: _____

Select one - Report Narrative only?: Report and all photos?:

Internal Information (SFM Only)

Subpoena: YES NO Subpoena Date: _____

Was Information Sent: YES NO Date Sent: _____

If Not Why: _____

Information Sent: _____

Cost: \$ _____ Issued By: _____