

MONTEREY COUNTY REGIONAL FIRE DISTRICT

19900 Portola Dr., Salinas, California 93908 (831) 455-1828 Fax (831)455-0646 www.mcrfd.org



Michael B. Urquides, Fire Chief
David J. Sargenti, Deputy Chief

Eric Ulwelling, Division Chief/Training
Kevin Kamnikar, Division Chief/Fire Prevention
David Craddock, Division Chief/EMS & Safety

Request Form for Fire/EMS Incident Report

I am requesting the Monterey County Regional Fire District record types selected below:

- INCIDENT REPORT.** Report created by the Incident Commander that complies with the rules of the National Fire Reporting System (NFIRS)
- FIRE INVESTIGATION REPORT.** Not all fires have a Fire Investigation Report. Depending on the incident complexity and other factors a report may not be completed for weeks or months.
- EMS/MEDICAL REPORT.** A patient authorization form is required if the report contains confidential medical information and is requested by any party other than the patient or a court ordered subpoena of records. Court orders do not require additional information, however, patients **MUST** provide photo identification before the report can be released. A copy of their photo ID shall be attached to the completed Fire/EMS Incident Request Form.

The information requested below must be completed in full. Requests without the required information will be returned to the sender. If you do not have the necessary incident information, you may contact the Monterey County Regional Fire District Administration Office at (831) 455-1828 or by email at: kkuntz@mcrfd.org

Please note: We try to process requests within 10 working days. The District may require additional time to process more difficult requests and if so, an estimated time frame will be provided to the requestor.

Please type or write clearly:

Requestor Name: _____ Date: _____

Street: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Incident Date: _____

Incident Address: _____

Type of Incident: _____

Reason for Request: _____

Please return this form to:

Medical report requests: must include this form, a valid HIPPA Authorization and supporting documentation by the patient (if applicable)

Monterey County Regional Fire District
Attn: Records
19900 Portola Drive, Salinas CA 93908
or email to: kkuntz@mcrfd.org

Fire District Use Only

Incident Number: _____

Date Received: _____

Initials: _____