



Fire Department
103 W. 9th
Georgetown, Texas 78626
512-930-FIRE (3473)
Fax: 512-930-3613

Request for GFD Incident Report

Name: _____ Date: _____

Agency: _____

Address: _____

City / State / Zip: _____

Requestor's Signature: _____ Contact #: () _____

Email / Fax # :() _____

The information requested will be provided to the person/organization as entered above. The above request pertains to a Georgetown Fire Department incident report for (check one):

Fire

Medical

Other

Location incident occurred, as recorded on incident report: _____

GFD INCIDENT # _____ - _____ - _____
Date occurred (Mo-Day-Yr) Owner's Name

Other additional information: _____

Completed by: _____

Important Information regarding Requests:

1. All requests for a GFD Incident report must be **in writing with the Requestor's Signature**.
2. Incidents occurring less than 1 week before the report date or older than 3 years are considered to be "not readily available information" per the Texas Open Records Act. Labor charges may be applicable for researching this information.
3. A GFD agent will endeavor to provide the requested information within ten (10) days from time request was received.
4. Completed "Request for GFD Incident Report" forms maybe faxed, U.S. mail, office visit pickup, or email at Fire@georgetowntx.org.