

REQUEST FROM SOLICITOR / INSURANCE COMPANY / LOSS ADJUSTER FOR FIRE REPORT

General Guidance for completing the Request Form

Please complete the form below. This form can be completed electronically, but must be printed off, signed and posted to the following address:

Service Development Department
Lancashire Fire and Rescue Service
Fire Service Headquarters
Garstang Road
Fulwood
PRESTON
PR2 3LH

When sending the completed form, a cover letter and cheque for £132.00 including VAT should be included. This £132.00 is an application fee and is not refundable. Cheques should be made payable to Lancashire Combined Fire Authority.

Guidance for completing the Sections of the Request Form

1. The Company Name required in Section 1 is the name of the Solicitors, Insurance Company or Loss Adjusters making the request.
2. The Company Details required in Section 2 are the details of the Solicitors, Insurance Company or Loss Adjusters making the request.
3. The Company Reference referred to in Section 3 is the Reference that you would like stating in all correspondence between yourselves, and the Fire and Rescue Service.
4. In Section 4, you should record the name of the person / organisation who you are acting on behalf of.

*If a third party, please detail this party's connection with the incident / property.

5. Please make clear if client is the Owner or Occupier, or a third party.

*If a third party, please detail this party's connection with the incident / property.

Section 5 can be left blank if not relevant.

6. Section 6 should be completed with the date the incident in question occurred.
7. If this is not the address where the fire originated, ie. is a property damaged by 'fire spread', please also state the address at which the fire originated.

REQUEST FROM SOLICITOR / INSURANCE COMPANY / LOSS ADJUSTER FOR EXTRACT FIRE REPORT

1	Company name:	
2	Company details:	Postal address: Telephone Number: Contact Name: Contacts Telephone Number: Email:
3	Company's reference:	
4	Who you are acting on behalf of (your client): Please state your client's connection to the incident (ie. owner, occupier or third party*) <small>*see guidance notes</small>	
5	If your client is an insurance company, please state <u>their</u> insured party, and this party's connection with the incident*:	

6	Incident date of required extract:	
7	Incident address / location of required extract:	

Additional Information (where applicable):

To apply for the above mentioned Fire Report, I enclose a cheque for £132.00 including VAT, made payable to Lancashire Combined Fire Authority.

I can confirm that all parties mentioned above have no intention of pursuing Lancashire Combined Fire Authority or Lancashire Fire and Rescue Service for damages, resulting from the above mentioned incident.

Please print your name:

Signed: **Date:**