

INITIAL INSPECTION REQUEST DAY CARE

NOTE: ALL BLANKS MUST BE COMPLETED OR REQUEST WILL BE RETURNED

FEE: 25.00 FEE MUST BE ACCOMPANIED BY REQUEST

TO: Office of the State Fire Marshal
1207 Quarrier Street 2nd Floor
Charleston, WV 25301
Attn: Inspection Division
Phone: 304-558-2191 ext. 53214
Fax: 304-558-2537

I am requesting a fire safety inspection for the facility listed below:

NAME OF FACILITY: _____

CONTACT PERSON: _____

ADDRESS OF FACILITY: _____

CITY: _____ ZIP CODE: _____

COUNTY: _____

HOME PHONE: _____ WORK PHONE: _____

SPECIAL INSTRUCTIONS OR DIRECTIONS: _____
