



COUNTY OF LEXINGTON
DEPARTMENT OF EMERGENCY
SERVICES



FIRE SERVICE DIVISION

DOCUMENT RELEASE FORM

It is the policy of the Department of Emergency Services to comply with the provisions of the South Carolina Freedom of Information Act by releasing the following departmental records.

- 1. (Incident Address)
2. (Recipient Printed Name)
3. (specify)

I have received a copy of the above described.

FIRE SERVICE OTHER (specify)

DOCUMENT(S) PERTAINING TO CALL # -

Signature of Recipient Date Firm

Releasing County Official Date

Fire Report Fee (\$10 per report with the exception of the property owner/renter)

Type of Payment (card or check ONLY): Amount Accepted: