## LOCAL FIRE INSPECTION AUTHORITY INFORMATION REQUIRED BY THE DEPARTMENT OF SOCIAL SERVICES, COMMUNITY CARE LICENSING DIVISION

DATE:		
APPLICANT NAME:	 	 
FACILITY NAME:	 	
FACILITY ADDRESS:		

As part of the application process, the licensing agency is responsible for obtaining a fire safety inspection from the local fire inspection authority having jurisdiction in the area where your facility is located.

To help us expedite this process, we are requiring that you identify the local fire inspection authority that is responsible to inspect your facility and issue a fire clearance.

LOCAL FIRE INSPECTION AUTHORITY:

ADDRESS:

CITY AND ZIP CODE:

PLEASE RETURN THIS FORM WITH YOUR COMPLETED APPLICATION

LIC 9054 (3/99)