INITIAL INSPECTION REQUEST
APARTMENTS
(12 or Less Units Per Building)

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

FEE: 50.00 FEE MUST BE ACCOMPANIED BY REQUEST
(Check or Money Order)

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

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

NAME OF FACILITY: ________________________________________________

CONTACT PERSON: ________________________________________________

ADDRESS OF FACILITY: ____________________________________________

CITY:_________________________ ZIP CODE:__________________________

COUNTY:_________________________

CONTACT PHONE:_____________ OTHER PHONE:_______________

SPECIAL INSTRUCTIONS OR DIRECTIONS: ______________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Internal Use Only
Reference #
Check #
Invoice #
Amount