



SEARCH of FIRE PREVENTION BUREAU RECORDS - Application



Clark County Fire Department Fire Prevention Bureau

575 E Flamingo Rd • Las Vegas NV 89119 • Phone (702) 455-7100 • Fax (702) 735-0775
Website: www.clarkcountynv.gov/depts/fire • • • • Email Address: permits@clarkcountynv.gov

**\$80.00 minimum application fee per address -or- \$165.00 minimum expedite fee per address is due at time of submittal.
Fee is payable in exact cash, check/money order (drawn from US bank – payable to CCFD), or FD escrow account only.**

FDRS is a search of Fire Prevention Bureau records for a specific property address. When a search request includes multiple addresses and/or multiple APN's (multiple buildings and/or suites are considered multiple addresses), an application fee payment of \$80.00 must be submitted for each address and/or APN along with a separate application form. If requesting an expedite search, an additional \$85.00 must be submitted with each application (total of \$165.00 for each address and/or APN).

Application Date: _____ **Payment Type:** Cash Check -or- FD Escrow Account #: _____
(Please circle one)

SEARCH INFORMATION

Expedite: Yes or No Municipal Project/Property: Yes or No APN: _____
Property Address: _____ Bldg-Suite #: _____
Business name related to property or other identifying information: _____

Check applicable line item(s) below:

- A. Flammable and Combustible Liquid Storage Tanks and Permits.
- B. Hazardous Materials Storage and Use Permits.
- C. Fire Code Violations.
- D. Fire Department Response to Fires, Hazardous Materials Incidents, etc. [Date of incident: _____]
- E. Request for Plans (must provide CCFD application number): _____
- F. Other - please specify: _____

Preferred media response:

Email Fax Paper Copy (\$1.00 per page)

Preferred method of pick up:

Pick up US Mail, FedEx, UPS, etc. *(Self addressed-stamped envelope or account # must be provided)*
Account #: _____

APPLICANT INFORMATION

Submitting Company Name: _____
Mailing Address: _____ Bldg-Suite #: _____
City, State, Country, Zip Code: _____
Company E-mail Address: _____
Company Phone #: (____) _____ - _____ Company Fax #: (____) _____ - _____
Applicant Phone #: (____) _____ - _____ Ext: _____ Fax #: (____) _____ - _____
Applicant E-Mail Address: _____

Applicant Name and Title

Applicant Signature