



**COUNTY OF LEXINGTON
DEPARTMENT OF PUBLIC SAFETY**



FIRE SERVICE DIVISION

DOCUMENT RELEASE FORM

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

1. _____
(specify)
2. _____
(specify)
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)

Amount Accepted: _____ Type of Payment: _____