

**ORO-MEDONTE FIRE AND EMERGENCY SERVICES
APPLICATION FOR FIRE INSPECTION**



Request Number _____ (Office Use Only)

Date: _____

Inspections are conducted on a "Request or Complaint" basis. The associated fee for the Fire Inspection must be paid in full before inspections can be scheduled.

Name of Person Requesting _____

Address: _____

Telephone Number: _____

Name of Property: _____

Location of Property: _____

Name of Owner: _____

Address of Owner: _____

Telephone Number: _____

Signature: _____

Request:

Basis of Request Inspection

- Property Sales (Requires written permission from owner)
- Annual Inspection
- Renewal of Mortgage
- Special Occasion Permit

Complaint:

Basis of Complaint Inspection

- Property Sales (Requires written permission from owner)
- Suspected Risk to Life
- Suspected Violation of Fire Code
- Direct Violation of Fire Code

Description of Building

- | | | | |
|---------------------------------------|---|---|---|
| <input type="checkbox"/> Office | <input type="checkbox"/> Service Station | <input type="checkbox"/> Duplex | <input type="checkbox"/> Hot Dog Cart |
| <input type="checkbox"/> Bank | <input type="checkbox"/> Condominium | <input type="checkbox"/> Townhouse | <input type="checkbox"/> Other: Explain _____ |
| <input type="checkbox"/> Professional | <input type="checkbox"/> Hotel/Motel | <input type="checkbox"/> Educational/School | _____ |
| <input type="checkbox"/> Church | <input type="checkbox"/> Restaurant | <input type="checkbox"/> Apartment Building | _____ |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Camps/Tents | _____ |
| <input type="checkbox"/> Mercantile | <input type="checkbox"/> Amusement/Recreational | <input type="checkbox"/> Chip Truck | _____ |

Building Height: _____ ft.	Stories: _____
Number of Rooms: _____	Number of Occupants: _____
Handicapped Persons: Y _____ N _____	Number of Persons: _____
Number of Adults: _____	Number of Children: _____
# of Smoke Alarms: _____	Alarm System: Y _____ N _____

PAYMENT OPTIONS:

Cheque payable to: Township of Oro-Medonte

Mailed to: Township of Oro-Medonte Administration Building, 148 Line 7 South, Oro, ON L0L 2X0

NOTE:

Fees will be charged in accordance with the Township's Current Fees and Charge's By-Law, available on the Township website. www.oro-medonte.ca.

All requests or complaints will be addressed in order on a priority basis. You will be contacted prior to inspection being carried out. Oro-Medonte Fire & Emergency Services reserves the right to withhold any results from the Inspection until Fire Code compliance is achieved.

Please note that contraventions of the Ontario Fire Code constitute offences under the Fire Protection & Prevention Act 1997. You are advised to take corrective action in order to accomplish compliance. Please notify the Oro-Medonte Fire & Emergency Services when you are complete.

Personal information contained on this form is collected pursuant to The Municipal Freedom of Information and Protection of Privacy Act, and will be used for the purpose of performing a Fire Inspection only. Questions about this collection should be directed to the Freedom of Information Officer, Township of Oro-Medonte, 148 Line 7 South, Box 100, Oro, ON L0L 2X0.