Hawaii Fire Department

Fire Chief Kazuo Todd , Temporary Custodian of Records

25 Aupuni St. Ste 2501

Hilo, HI 96720

(808)932-2909

**RE: ACKNOWLEDGMENT OF RECEIPT**

Date:

Requestor:

Requesting Agency:

Date Received:

Reference ID:

The undersigned hereby acknowledges receipt of following documents from the Hawaii Fire Department for Incident number:

Fire RMS Report(s)

Fire Chronology Transcription(s)

911 Audio File- for Incident(s)

Fire Investigative Report (K9 and Interview)

Other documents as described:

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(Print Name of Recipient)

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Recipient) (Date received)

*Record requests can be sent to:* [*FireRecords@hawaiicounty.gov*](mailto:FireRecords@hawaiicounty.gov)