



Oxnard Fire Department

360 W. Second Street • Oxnard, CA 93030
(805) 385-7722 • Fax (805) 385-8009



REQUEST FOR FIRE INCIDENT RECORDS

The public has a right to obtain information per the California Public Records Act. Oxnard Fire Department (OFD) makes every effort to comply with requests for public records while ensuring compliance with federal, state, and local laws (HIPAA and California Privacy).

MEDICAL RECORDS will not be released without a properly completed OFD "Authorization to Release Pre-Hospital Medical Records" form (OFD Medical Release), or by court order. Otherwise, all medical assessments will be removed (blacked out or withheld).

Please Read and Make a Selection from the Record Types Listed Below

INCIDENT REPORT (IR) An IR is produced for each event to which OFD equipment and staff respond. The IR is constructed under the rules of the National Fire Incident Reporting System (NFIRS). All medical assessments will be removed without a properly completed OFD Medical Release.

- Incident Report** Does not include any medical assessments.
- Incident Report with OFD Pre-hospital Medical Release** A properly completed OFD "Authorization to Release Pre-Hospital Medical Records" form must accompany this request. Any medical assessment record(s) completed by OFD personnel will be included with the IR. In some cases, private ambulance company personnel will make the medical assessment, in which case OFD may have only *some or none* of the medical records.

FIRE INVESTIGATION REPORT (FIR) A FIR may be generated when members of the Investigation Unit are called to investigate the cause of a fire. Not all fires are investigated. To determine the availability of a report before submitting the request below, call Fire Administration at (805) 385-7722.

- Fire Investigation Report** The FIR includes the written document (hard copy of the report) with the associated pictures in a CD-ROM format. All medical assessments in written and picture form will be removed unless a completed OFD Medical Release form is included.
- Fire Investigation Report with OFD Pre-Hospital Medical Release** Same as the FIR above but also includes any medical assessments. A properly completed OFD "Authorization to Release Pre-Hospital Medical Records" form must accompany this request.

Incident Information – Please Print Legibly

Incident Number (if known, assigned by OFD, not by law enforcement): _____

Incident Date (required): _____ **Incident Time** (approximate): _____ a.m. or p.m.

Incident Address/Location: _____

Nearest Cross Street (if known): _____

Type of Incident (fire, traffic collision, etc.): _____

Name of Requestor: _____

Requestor's Mailing Address: _____

Requestor's Phone Number: _____ **FAX Number:** _____