

## **FIRE DEPARTMENT BUREAU OF FIRE PREVENTION** FIRE ALARM INSPECTION UNIT



9 METROTECH CENTER, BROOKLYN, N.Y. 11201-3857 TELEPHONE: (718) 999-2469 FAX: (718) 999-2892

## **ACCOUNT ACCESS REQUEST**

## Instructions:

- The following form shall be completed and signed by the Owner (Property Manager, Managing Agent, etc.). A separate form must be submitted for each **account number** to which access is being requested.

1 APPLICANT INFORMATION (Owner, Partner, Corporate or LLC Office, Managing Agent, Property Manager, etc.)		
Last Name:	First Name:	
Address (House No, Street Name, City, State, Zip):		
Business Telephone:	Mobile Telephone:	E-MAIL:
2 PROJECT INFORMATION		
Address (House No, Street Name, City, State, Zip):		
Business Name:		BIS Job No.:
3 APPLICANT'S STATEMENT (must be notarized)		
	, being duly sworn affirm that I am the	(Owner, Managing Agent, Property Manager, etc.)
I hereby grant permission to	(Name of Individual/ Company)	to act as my representative
in all aspects in order to obtain access to all information pertaining to the construction documentation filed under the		
Department of Buildings Plan/Work Application No. (PW-1)		
Further, I hereby authorize my representative to answer and manage any and all questions related to the Fire Department		
Title:	NOTARIZATION:	
Signed:	State of New York, County of:	
Name (print):	?	Notary Seal
Date:	perjury day of 20	
	Notary Public Signature	
4 RESOLUTION (Office Use Only)		
1		
Date:	FPIMS Account No:	Outstanding Balance,\$
Access:	pproved Denied	
Access Processed By:		
Release of Information Approve	(PAA) (Print)	(Signature)
(Director of FAIU, Deputy Chief Insp		(Signature)

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