



## MFRS Request for Information

### Information Request details

Information requested	Standard Incident Report <input type="checkbox"/> Other <input type="checkbox"/> (please state)		
Date of Incident		Incident no. (if Known)	
Address of Incident			

### Requester Details

Name			
Organisation (if applicable)			
Postal Address			
E-mail address			
Telephone No.			
Reference no. / Purchase Order no. (if applicable)		Signature:	

**Payment to be made via internet bank or card payment, please contact us for further information.**

**Information requested once approved and payment received, will be emailed securely. If unable to provide a secure email, Egress will be used. Alternatively, please advise if you would prefer a hard copy of the information to be sent to your postal address.**

**Please submit this form to: -**

**Information Assistant  
Strategy and Performance  
Merseyside Fire and Rescue Service  
Bridle Road  
Bootle  
Merseyside  
L30 4YD**

**Telephone Number: 0151 296 4426 / 5  
Email: [informationassistant@merseyfire.gov.uk](mailto:informationassistant@merseyfire.gov.uk)**