Date	PU or DEL		
Time:	Trailer:		

Office of the State Fire Marshal Request Form for:





☐ Life Safety House (trailer) ☐ Sparky The Fire Dog Suit

Instructions	1. Complete all boxes on this form.								
	2. Email this form to amccormick@utah.gov.								
	3. Requests must be made at least one month in advance of your event. Cancellations must be made								
	at least 2 days in advance.								
	4. Co	ntact Ar	ndrew @ 80	01 702 7748 for trans	sportation proc	esses, special requests, e	etc.		
Fire Dept. Name				Contact Person		Phone number:			
•									
Location of Event:				A	Alt phone number				
Email									
Ι	Date Re	quest:			Delivery o	ptions			
	Date		Time		We need it delivered:				
	m/d/	уу							
Delivery					We can pick	it up:			
Event Start									
Event End									
Pick Up									
тек ор									
						0 :4			
Proper use of Trailers and Sparky Suit									
If requesting Sparky the Fire Dog suit, please read this "appropriate use" file and sign below that you will follow all the									
						at is liable for any fees ass			
	_	-	_	- ·		Ž	1 1		
upkeep. Read more here. Type or sign your name here to agree:									
Describe your event.									
Describe where to place trailer:									
I agree that whi	I agree that while in the above listed organization's possession, all policies for the Life Safety House and/or the Sparky Suit will be								
followed. In addition, I agree to notify the State Fire Marshal's Office of any damages of the Life Safety House or any of its									
contents. We will follow all applicable laws while using the Life Safety House and hold harmless the State, Department of Public									
Safety, and the Fire Marshal's Office for any negligence as a result of misconduct or improper use by the user.									
Signature (by typing in your name you agree to the above statement) Signature: Date									
Date									
For Office Use Only									
			1						
Approval Date	<u> </u>			Confirmation sent		Disapproved due to:			