HOME FIRE AND LIFE SAFETY INSPECTION REQUEST

This form may be dropped off at the Los Lunas Fire Department located at 465 E. Main St Los Lunas, NM 87031, or it can be mailed to PO BOX 1209 Los Lunas, NM 87031

Property Owner: ____________________________________________________________

Address of Inspection: ______________________________________________________

E-Mail Address: _____________________________ Phone Number: (_____) _________

Type of inspection: (check one)

☐ Entire home interior and exterior       ☐ Interior only

☐ Exterior only                        ☐ Other (describe below)

Description or additional information:

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

X

Property Owners Signature

OFFICIAL USE ONLY

Date received: _______________ Received by: _______________________________________

Scheduled date and time: _______________________________________________________

Assigned to: ___________________________ Date completed: _____________________