

Inspection Request

Rangehood, Non-Water Suppression System, Sprinkler, Standpipe, Bulk Fuel Storage

*** Indicates a Required Field**

Requester's Contact Information

Contact Persons Role *	Licensed Master Fire Suppression Contractor	
Contractor Company *		
DOB License Number *		
FDNY C of F Number *		
First Name *		
Last Name *		
Phone Number *		
Email *		
Will the above person be the on-site contact *	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If NO name of on-site contact *		

Location of Inspection/Test

Corporation/Business Name *			
Doing Business As (DBA)			
Street Address *			
Borough *	Manhattan		
Zip Code *			
Type of Test Requested *	Gas Station Discharge Lines Excavation/Bottom Slab		
Initial/Reinspection/Retest *	Initial <input type="checkbox"/>	Reinspection <input type="checkbox"/>	Retest <input type="checkbox"/>
FPIMS Account Number *			

Inspection Date

We will attempt to schedule your requested appointment on one of these two dates.

Preferred Date *			
Alternate Date *			

FAX OR E-MAIL INSPECTION REQUEST TO THE FOLLOWING

Alternate Agent 718-999-2891
 Rangehood (NON-NBAT) 718-999-2893
 Sprinkler/Standpipe 718-999-2891
 Sprinkler/Standpipe e-mail stp/spk@fdny.nyc.gov
 Bulk Fuel Safety e-mail bfsu@fdny.nyc.gov