



Portland Fire Department 380
 Congress Street
 (207)874-8400
 Fireprevention@portlandmaine.gov

Company: _____
 Address: _____
 Phone number: _____
 Owner/manager: _____

Signature _____

Registration number

Fire Alarm Inspection Sticker Record

1st / 2nd / 3rd / 4th Quarter 20_____

Number	Location	Date	Inspector Name	Inspector Signature

Number of stickers affixed this quarter: _____ x \$25 _____ Amount Due this quarter