



**City of Annapolis**  
**Finance Office**  
 160 Duke of Gloucester Street  
 Annapolis, MD 21401-2517

[utilitybilling@annapolis.gov](mailto:utilitybilling@annapolis.gov) • 410-263-7953 • 410-263-7952 • Fax 410-263-7529 • TDD use MD Relay or 711 • [www.annapolis.gov](http://www.annapolis.gov)

## Fire Inspection Request Form

**Requesting agency**

Anne Arundel County Department of Social Services

Social Worker \_\_\_\_\_ Phone \_\_\_\_\_

MD State Department of Education, Office of Child Care

Licensing Spec. \_\_\_\_\_ Phone \_\_\_\_\_

Other agency \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

**Provider information**

Name \_\_\_\_\_ Phone(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, MD Zip \_\_\_\_\_

License expiration \_\_\_\_\_

*Please check appropriate fee category:*

		New	Renewal	
Family dwelling	RES 51	\$25.00	Current registered capacity	_____
Family or Group Day Care Home	EDU 41	\$50.00	<u>All</u> children under 2	_____
Day Care Center	EDU 51	\$70.00	Provider's own children under 2	_____

**Requester**, please send payment to Finance (above) for the category fee. Checks should be made payable to *City of Annapolis*. A receipt will be forwarded to the Fire Marshall's Office promptly for the inspection to be scheduled.

**FOR CITY USE ONLY**

**Cashiers**

Post to account 01042-434050

Fax to FMO at 410-268-1846

Send originals via interoffice mail

*Attach cash receipt here*

**FMO evaluation**

*Family Day Care*

Room	Play	Sleeping
Living room		
Kitchen		
Family room		
Den		
Basement		
Basement		
Bedroom		

Room	Play	Sleeping
Bedroom		
Bedroom		
Bedroom		
Other room(s)		

*Centers*

1. Is this located in a school?                      Yes              No              Current licensed capacity \_\_\_\_\_
2. Is the entire building approved?              Yes              No
3. If not, name rooms approved. \_\_\_\_\_
4. Name rooms **not** approved. \_\_\_\_\_

*Comments*

Passed              Failed              Reinspected              Date \_\_\_\_\_

Inspector \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

