



VENTURA COUNTY FIRE PROTECTION DISTRICT
FIRE PREVENTION BUREAU
165 DURLEY AVENUE
CAMARILLO, CA 93010
www.vcfd.org

Office: 805-389-9738 Fax: 805-388-4356

FORM 611 INSPECTION REQUEST

Inspection request shall be submitted by 4:00 pm one business day prior to inspection.

Sections 1 & 2 must be completed to process request. See page 2 for instructions.

Phone: 805-389-9744

Email: fire.inspections@ventura.org

Fax: 805-388-4356

SECTION 1 INFORMATION

Project Name: _____
Record Number(s): _____
Inspection Address: _____
(Number/Street) (City)
Additional Information: _____
(Tract Number, Lot Number(s), Travel Time, AM/PM Request, etc.)
Requestor Name: _____ Phone: _____ Email: _____

SECTION 2 INSPECTIONS

Underground Fire Line UG Rough UG Hydro UG Flush

Commercial Fire Sprinklers OH Rough OH Hydro OH Final TI Rough TI Final
Number of Heads: _____

Residential Fire Sprinklers UG Rough UG Hydro UG Flush
 OH Rough OH Hydro OH Bucket OH Final

Other Fire Protection Systems Hood System Fire Alarm System Spray Booth System
 Clean Agent Other: _____

Certificate of Occupancy Commercial Occupancy Final Residential Occupancy Final
 Fire Protection System Verification

Operational Fire Code Permit

Licensed Care Inspection LCF Pre-Inspection LCF Re-Inspection

Other _____

Inspection Request Instructions

*Inspection requests shall be received by the Fire District before 4:00pm, a minimum of one business day prior to any inspection. **An inspector will call you back between 7:00-8:30am on the day of the inspection with an inspection time.** Inspections are normally scheduled between 9:00 am to 2:00 pm Monday through Friday. After hours inspections require prior Fire Department approval.*

Sections 1 and 2 must be completed in order to process the inspection request

SECTION 1 INFORMATION

- Enter the Project Name (name of business, event, facility, etc.)
- Enter the fire prevention Record number. (This starts with FPLN, FNC, FPS, FCP, LCF)
- Enter the physical address of the project to be inspected. If no address has been assigned use the parcel information and nearest cross street(s).
- Provide any additional information such as Lot #'s, Tract #, Special Requests, Inspection date
- Enter the contact person's name and phone number and email address

Note: the contact person must be available for calls by 7:00 a.m. on the day of the inspection

SECTION 2 INSPECTIONS

1. Identify all inspections to be requested.
2. Check the box next to each inspection being requested.
3. If you do not see your inspection type, check other and provide a description.

Submit your inspection request via email at fire.inspections@ventura.org