



**Travis County Emergency Services District No. 6  
Lake Travis Fire Rescue**

15304 Pheasant Lane, Austin, TX 78734  
512.266.2533 FAX 512.266.7065  
www.lifr.org

**Request for Services**

**SERVICE TYPE AND REQUIRED FEES**

ALL FEES MUST BE PAID IN ADVANCE.

Public entities and non-profit organizations are not subject to fees.

SERVICE TYPE	SERVICE FEE
<input type="checkbox"/> Fire or EMS Report	\$5
<input type="checkbox"/> Copies of fire department documents	\$0.10 per page or as specified per Open Records Act Administrative Code Title 1, Part 3, Chapter 70, Rule 70.10
<input type="checkbox"/> Kitchen Hood Extinguishing System	\$50 per system
<input type="checkbox"/> Fire Suppression System Test	\$100
<input type="checkbox"/> Adoption/Foster Home Inspection	\$15
<input type="checkbox"/> Daycare Annual Inspection	\$100
<input type="checkbox"/> Healthcare/Assisted Living Annual Inspection	\$45 + \$15 per additional bldg.
<input type="checkbox"/> Hospital/Licensed Clinic Inspection	\$100
<input type="checkbox"/> TABC Alcohol License Inspection	\$50
<input type="checkbox"/> Hazardous Materials Permit Request	\$250
<input type="checkbox"/> Mass Gatherings Permit Request	\$200 + \$75 per hour for FD personnel on site during event
<input type="checkbox"/> Fire Watch Request	\$75 per hour + cost of apparatus
<input type="checkbox"/> Re-inspection (3rd and subsequent visits) for Fire Final or Fire Protection System	\$150

Requested Date/Time for Service:

Fee Enclosed:

BUSINESS NAME WHERE INSPECTION/SERVICE REQUESTED

ADDRESS WHERE INSPECTION/SERVICE REQUESTED

**APPLICANT INFORMATION**

APPLICANT	TELEPHONE	FAX
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BUSINESS NAME AND MAILING ADDRESS

SIGNATURE OF APPLICANT	DATE
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**COMMENTS**

Large empty box for comments.

**TCESD#6 USE ONLY**

RECEIVED BY	AMOUNT PAID	CHECK NUMBER	COMMENTS
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