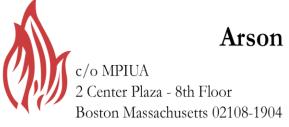
Arson Watch Reward Program



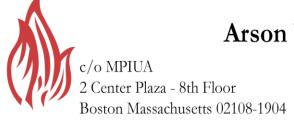
617-723-3800 800-851-8978 www.arsonwatchrewardprogram.org

REWARD APPLICATION

TODAY'S DATE				
NOMINATORS NAME		TITLE		
DEPARTMENT		TELEPHONE NUMBER		
ADDRESS	CITY/TOWN	STATE	ZIP CODE	
LOCATION OF FIRE	ADDRESS-CITY/TOWI	N STATE	DATE OF FIRE	
INSURANCE COMPANY	ADDRESS	INSURANCE CON	MPANY CONTACT	
ESTIMATED AMOUNT OF	LOSS			
NAME OF ACCUSED (IF APPLICABLE)			DATE OF CONCLUSION OF ANY CRIMINAL CASE	
LEGAL JURISDICTION/DI	SPOSITION/SENTENCE F	REMARKS		
<u>NOMINEE</u>				
NAME	ADDRESS			
CITY/TOWN	STATE		ZIP CODE	
OR SEVEN-DIGIT NUMBE	R TO MAINTAIN ANONYI	MITY		
REASON FOR ANONYMIT	ΥΥ			

1/2 Rev'd 7.18

Arson Watch Reward Program



617-723-3800 800-851-8978 www.arsonwatchrewardprogram.org

I NOMINATE _____ TO BE CONSIDERED FOR THE ARSON WATCH REWARD PROGRAM BECAUSE OF THE FOLLOWING:

Comments:	

2/2 Rev'd 7.18