Formal Interpretation Request Form

(This information is requested in Section 6 of the Regulations Governing Committee Projects)

Name:_____

Company:_____

Address:_____

Phone: _____ Fax:_____

NFPA Document No.:_____**Edition:**_____**Paragraph Reference:**_____

NFPA Membership #_____

Did this question arise from an actual field situation? ☐ Yes ☐ No

Please state your business interest in the matter and identify other parties involved:

_____

Question *(should be worded so that it can be answered with either yes or no)*:

_____

Signature:_____Date:_____

Mail to: Secretary, Standards Council • National Fire Protection Association
One Batterymarch Park, PO Box 9101 • Quincy, MA 02269-9101
Fax No. 617-770-3500

Reset