

F.O.I.L. RECORDS REQUEST

WITHIN 5 BUSINESS DAYS YOU WILL BE NOTIFIED OF:
THE COST OF AVAILABLE RECORDS

OR:

RECORDS DENIAL WITH THE BASIS FOR THE DENIAL

OR:

ACKNOWLEDGEMENT OF REQUEST WITH TIME ESTIMATE
NEEDED TO FILL REQUEST

A REPORT FEE OF \$.25 PER PAGE IS DUE PRIOR TO RELEASE OF RECORDS
PHOTOGRAPHS ARE SUBJECT TO THEIR OWN FEE SCHEDULE
YOU WILL RECEIVE RECORDS REQUESTED UPON RECEIPT OF PAYMENT!

DATE: _____ PHONE: _____

NAME: _____
(PROOF OF IDENTIFICATION REQUIRED)

ADDRESS: _____

EMAIL: _____

INVOLVEMENT: Complainant: Victim: Witness: Other: _____
(explain)

REPORT/RECORD TYPE: Incident: MVA Investigation: Other: _____
(explain)

Report#: _____ Background Check: _____ Photographs: _____

REASON: Insurance: _____ Attorney/Court: _____ Personal Record: _____ Employer: _____
Other: _____
(explain)

INCIDENT LOCATION: _____ DATE/TIME: _____

BRIEF DESCRIPTION OF INCIDENT: _____

FOR OFFICE USE ONLY:

Approved: _____ Denied: _____ Referred To: _____