

# SPENCER POLICE DEPARTMENT

## REQUEST FOR POLICE RECORDS

### REQUESTER'S INFORMATION

REQUESTED BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ DATE REQUESTED \_\_\_\_\_

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### INCIDENT INFORMATION

TYPE OF RECORD REQUESTED: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

SHORT GIST OF INCIDENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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YOU WILL BE CONTACTED WHEN YOUR REQUEST HAS BEEN APPROVED AND THE RECORDS HAVE BEEN PREPARED. ALL REQUESTS SHALL BE PROCESSED AS SOON AS PRACTICABLE AND WITHIN TEN DAYS, UNLESS OTHERWISE AGREED UPON.

ACCIDENTS REPORTS	\$5.00	UP TO SIX PAGES
INCIDENT REPORTS	\$1.00	PER PAGE
OTHER RECORDS	.50	PER PAGE
BAD CHECK FEE	\$25.00	

SEARCH AND SEGREGATION COSTS SHALL BE ASSESSED FOR LARGE AND TIME CONSUMING REQUESTS

ALL FEES MUST BE PAID WITH A PERSONAL CHECK, BANK CHECK, OR MONEY ORDER, MADE PAYABLE TO THE SPENCER POLICE DEPARTMENT.

**NO CASH WILL BE ACCEPTED.**