

Incident # _____

Juvenile Records

WHITEWATER POLICE DEPARTMENT OPEN RECORDS REQUEST

312 W. Whitewater St., Whitewater, WI 53190, 262-473-0555

Complete all information known in the first box below. **WE WILL CONTACT YOU WHEN YOUR REQUEST IS READY. Record processing may take up to 10 days, if the record is available for release.**

Date of Request: _____ Accident Report Incident Report Background Check
 Audio/Video CD/DVD Photographs
 Notary requested Certified Copy requested

Requester's Contact Information: Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax (No charge): _____

Email Address (No Charge): _____

Name of Individual Involved: Last _____ First _____ MI: _____

Date of Birth: _____ Alias: _____

Date of Incident: _____ Type of Incident: _____

Incident Location: _____

Additional Information: _____

FOR AUTHORIZED USE ONLY – DO NOT WRITE BELOW THIS LINE

Cost to Requester (if hard copies are printed and given to the individual via mail or in person):

- 1. Incident Reports/Accident Reports/Background Check/Department Logs
 - Up to 15 pages no charge, more than 15 pages \$0.10/pg: _____ # of pages @ \$0.10 = _____
 - 2. Photographs: (Special process may result in extra cost) _____ # of photos @ \$.75 = _____
 - 3. Audio/Video CD/DVD: _____ # of CD/DVD @ \$1.00 = _____
 - 4. Search Hours: (If cost exceeds \$50.00) _____ # of hours @ _____ = _____
 - 5. Postage: _____ = _____
- TOTAL COST** _____

.....
Date Received: _____ by: Mail Email In Person Phone Fax

Request Approved: Yes No Authority: _____

If no, reason for denial: _____

Contact Information: _____

.....
Date of Disbursement: _____ Method: Mail Email In Person Phone Fax

Items Disbursed: _____