

Little River Band of Ottawa Indians

Department of Public Safety

REQUEST FOR RECORDS

Requester: Read attached instructions before completing applicable areas of the form.

<p>Name of Requester: _____</p> <p>Company (If Any): _____</p> <p>Street Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: _____</p> <p style="margin-left: 40px;">Area Code: (____) Number: _____</p>	<p>Method of Access Desired</p> <p><input type="checkbox"/> Copies to be Mailed</p> <p>Address (if different from that given at left)</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Copies to be Inspected at:</p> <p>_____</p> <p><input type="checkbox"/> Other Location (Specify)</p> <p>_____</p>
<p>Your Client or Insured: _____</p> <p>Your File Number: _____</p>	<p>Signature of Requester: _____ Date: _____</p>
<p>Name Referred to in Record: _____</p> <p>Date of Birth: _____ Drivers License No. _____</p>	<p>Police Department Use Only</p> <p><input type="checkbox"/> Letter Attached</p> <p><input type="checkbox"/> Telephone</p> <p><input type="checkbox"/> In Person</p> <p>Departmental Member Receiving Request:</p> <p>Date: _____ Time: _____</p> <p>Complaint Number: _____ File Class: _____</p> <p><input type="checkbox"/> Copy of Requested Records Attached</p> <p><input type="checkbox"/> Requested Records Unavailable</p> <p>Recommendation On Release of Records</p> <p><input type="checkbox"/> Release</p> <p><input type="checkbox"/> Partial Denial (Personal Information)</p> <p><input type="checkbox"/> Partial Denial (Other)</p> <p><input type="checkbox"/> Full Denial (Reason): _____</p>
<p><input type="checkbox"/> Complaint Report (Give Report Number, If Known): _____</p> <p><input type="checkbox"/> Traffic Accident Report (Give Report Number, If Known): _____</p> <p><input type="checkbox"/> Criminal History Record</p> <p><input type="checkbox"/> Other Record (Describe)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>Date of Event (Be Specific): _____</p> <p>Location of Event (Be Specific): _____</p> <p>_____</p> <p>Specific Event to Which Record Refers:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>Signature of Chief of Police: _____ Date: _____</p> <p>Records Use Only</p> <p>Notification Date to Requester : _____ Time: _____</p> <p>Clerical Look up Time: _____ x Rate _____ = Look Up Cost _____</p> <p>Review Time: _____ x Rate _____ = Review Cost _____</p> <p>Number of pages: _____ x Rate <u>\$1.00</u> = Copy Cost _____</p> <p>DVD or CD Duplication _____ x Rate <u>\$10.00</u> = Copy Cost _____</p> <p>Photographs (Pages) _____ x Rate <u>\$2.50</u> = Copy Cost _____</p> <p style="text-align: right;">Cost to Requestor \$ _____</p>	