

OPEN RECORDS REQUEST TO RIESEL POLICE DEPARTMENT

**Riesel Police Department
P.O. Box 249
Riesel TX 76682**

Date: _____

This Request is made under the Texas Open Records Act, TEX. REV.CIV. STAT. Art. 6252-17a. In accordance with Section 4 of the Act, which requires the custodian of records to produce public information for inspection, duplication, or both, in the offices of governmental body, I hereby request ____ copies (*there will be a charge*) ____ access to review the following (fill in as completely as possible):

Arrest form(s) for the following person:

Name _____ DOB _____ Sex _____ Race _____

DL# _____ Arrest date _____

Offense(s) of _____

Police narrative report(s) concerning: {give case number or describe incident and give date, location, and persons involved}

Accident report concerning the following accident (*You must give at least three identifiers*): Date

Time _____ Driver(s) of vehicle(s) _____

Other (State specifically the type of information requested)

Print Name of Person Requesting Address

Signature of Person Requesting

Home Telephone

Business Phone

Note: This form is required by Riesel Police Dept. policy to protect Officers from allegations of unauthorized release of information. It is also used to track the release of information for persons having privacy concerns. All information from Police records is not open to the public and each request must be considered on a case by case basis.

case basis.