

TI VERTON POLICE DEPARTMENT

Request for Records Under the Access to Public Records Act



REV. 03/2021

REQUEST DATE:			
REQUESTING PARTIES INFORMATION (OPTIONAL)			
FIRST NAME:		LAST NAME:	
STREET ADDRESS:		CITY:	STATE: ZIP CODE:
HOME PHONE NUMBER:	CELL PHONE NUMBER:	EMAIL ADDRESS:	
WOULD YOU LIKE THESE RECORDS EMAILED TO YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO (PROVIDE EMAIL ADDRESS ABOVE)			
RECORDS REQUESTED			
REPORT NUMBER(S) (IF KNOWN):			
REPORT DATE(S) (IF KNOWN):			
LOCATION OF INCIDENT(S) (IF KNOWN):			
OTHER INFORMATION THAT MAY HELP LOCATE THE RECORD(S) YOU ARE REQUESTING:			
OFFICIAL USE ONLY			
REQUEST RECEIVED BY:	DATE RECEIVED:	TIME RECEIVED:	
REQUEST RECEIVED?	<input type="checkbox"/> WALK IN	<input type="checkbox"/> MAIL	<input type="checkbox"/> EMAIL <input type="checkbox"/> FAX <input type="checkbox"/> OTHER
REQUEST FILLED BY:	DATE CONTACTED:	TIME CONTACTED:	
REQUEST DELIVERED?	<input type="checkbox"/> IN HAND	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> MAIL <input type="checkbox"/> EMAIL <input type="checkbox"/> OTHER
NOTES:			

If these records are not available at the time of your request, you will be contacted when they are ready. Please be advised that the Access to Public Records Act provides a public body ten (10) business days to respond to a request. You are not required to provide identification or reasons why you are seeking the records. To ensure that you are provided with the records you are requesting in a timely manner, we ask that you complete this form. However, you are not required to complete this form in order to obtain records. For more information on public records requests, please visit the Rhode Island Attorney Generals website: www.riag.gov/civil/opengovernment