



CITY OF TOLLESON

Public Information Release Form

8350 WEST VAN BUREN STREET, TOLLESON ARIZONA 85353
623.936.7186 FAX 623.936.8202

It is the policy of the Tolleson Police Department to release to crime victims or their designated representative, one free copy of the crime report. Appropriate photographic identification must be presented to obtain free report. (Vehicle/Traffic related incidents are not included.) All other requests for Departmental Reports under the Public Information Records Law Pursuant to ARS 39-121, will be released at the following rates: Minimum of \$5.00 per report (includes up to twenty pages with each additional page \$0.20 cents); Archived Reports (prior to 2003) \$20.00 per report. Costs for cassettes, CD's, DVD's and video tapes are \$10.00 each.

Once a request for a copy of a report is received by Records' personnel, a response is generally received by the applicant within ten working days; however, it may take longer depending upon the type of report and investigation. Copies will be held 90 days from date of notification.

When applicable requests must be **paid in cash or money order at the time of the request.**

Adequate data must be supplied to this agency to locate the requested report. **Our Agency is not responsible for hand searching reports when adequate data is not known.** The more data given, the easier the records are to find.

It is requested the Tolleson Police Department release the following records to me.

Notification: Call when report is ready, I'll pick up. Mail report to address listed below.

Occurrence Information:

Report Number _____ Report Date _____ Time _____
Location _____
Type of Report _____

Requestor Information:

Name: _____
Cell Home Work Phone# _____
Address _____ City _____ State _____ Zip _____

Crime Victim:

Yes No
Relationship to Victim (BE SPECIFIC) _____
Self Spouse Parent Other Relative Lawful/Designated Representative

Purpose of Request:

Personal Court Insurance
Attorney Commerical News Release

Police Department Use Only

Date of Request _____ Received By _____

Date Processed /By _____

Left Message with: _____ Date: _____

Spoke to: _____ Time: _____

Appropriate Photographic Identification: _____

Release Approved By _____