



Jackson Police Department
Police Chief Michelle Weber
 PO Box 1687 / 150 East Pearl Avenue
 Jackson, Wyoming 83001

www.jacksonholepolice.com
 307-733-1430 phone
 307-733-3241 fax
 jpdic@jacksonwy.gov
EFFECTIVE 8-9-2021

REQUEST FOR POLICE INCIDENT REPORT

PLEASE PRINT LEGIBLY

INFORMATION ON PERSON MAKING REQUEST

FULL NAME OF REQUESTING PARTY: _____

EMAIL ADDRESS: _____ @ _____

MAILING ADDRESS: _____
 CITY ST ZIP

TELEPHONE: (c) _____ (w) _____

COLOR COPY OF DRIVER LICENSE OR GOVERNMENT-ISSUED ID PROVIDED / ATTACHED

DESCRIBE THE RECORD YOU ARE SEEKING

INCIDENT DATE (OR RANGE): _____ REPORT NUMBER: _____ - _____

WHERE DID INCIDENT HAPPEN (ADDRESS): _____

TYPE OF INCIDENT: _____ REASON FOR REQUEST: _____

FULL NAME OF PERSON INVOLVED: _____ DATE OF BIRTH: _____

RELATIONSHIP TO PERSON REQUESTING RECORD: SELF SPOUSE CHILD CLIENT _____

ADDITIONAL INFORMATION PROVIDED WITH REQUEST: _____

INDICATE HOW YOU WISH TO RECEIVE RECORD AND CALCULATE YOUR ***ESTIMATED*** FEE TO FULFILL THIS REQUEST:

PREFERRED DELIVERY METHOD OF RECORD: EMAIL PICK UP MAIL

		<u>QUANTITY</u>	<u>TOTAL</u>
<input type="checkbox"/>	POLICE REPORT (REQUIRING REDACTION)	\$14.00 EACH	_____
<input type="checkbox"/>	DVD / MEDIA (AUDIO OR VIDEO RECORDING)	\$14.00 EACH	+ _____
<input type="checkbox"/>	RESEARCH / COMPILATION (OUTSIDE WORK PLAN)	\$15.50/HOUR	+ _____
			= \$ _____ TOTAL EST. FEE

ESTIMATED FEES TO FULFILL THIS REQUEST WILL BE RECALCULATED
 BASED ON THE ACTUAL RECORD RELEASED.

(continued >)

PLEASE READ BEFORE SIGNING

- The decision to disclose or refrain from disclosing investigative reports in question is a matter of Jackson Police Department discretion.
- Records not yet adjudicated should be requested directly from the city or county attorney's office.
- Insurance / Legal Agencies may request records via email or fax on company stationery.
- Provide a color copy of your photo ID with your request.
- Please allow seven (7) days after submission for a copy of report or an update on the status.
- Email this completed request form to: JPDIC@jacksonwy.gov

THE FOLLOWING INFORMATION WILL NOT BE RELEASED:

- Graphic or sensitive photographs and personal information of people or corporations who have contributed documents or information to aid in the investigation will not be released without a court order.
- Confidential information, such as medical records, coroner's reports, and confidential reports issued by other agencies or companies and individuals. Personal information of other parties involved.
- The disclosure of law enforcement investigative reports may be contrary to the public interest. The reasons vary from case to case. Disclosure of the reports under some circumstances would severely hinder the integrity of the investigation and the subsequent criminal proceedings. It may also damage the reputation of a person who is initially a suspect but later absolved of any wrongdoing.
- Records that involve criminal history records, records pertaining to minors, records of sexual assault investigations, or records obtained through a 911 emergency telephone system.

I understand a fee may be incurred depending on the nature of the report and such fee will be paid before records are released.

I have read the information concerning what records will not be released (above). I understand the Jackson Police Department will make reasonable efforts to comply with the Wyoming Public Records Act.

I hereby request the previously described Jackson Police Department report(s).

SIGNED: _____ DATE: _____

Return this completed form, along with a copy of your ID, to the Front Desk at the Jackson Police Department, email to jpdic@jacksonwy.gov, or fax to 307-733-3241.