

# Grand Rapids Police Department

## Open Records Request Form



Public records may be requested, inspected and copies obtained during normal business hours of Monday through Friday, 8:00 AM to 4:00 PM. In some cases, records may require retrieval and therefore may not be immediately available for inspection. Every effort will be made to respond to the open records request as soon as is practicable and without delay.

The cost of photocopying of records shall be .25 cents per side of page, and photos are \$1 each, which has been calculated to be the actual, necessary and direct cost of reproduction. In some cases, such response costs may go beyond simply copying a requested record. In these cases, the Records Custodian may charge for any and all costs associated with complying with an open records request up to and including applicable shipping, mailing and hourly wages of Records Custodian or designee thereof. Per 19.35(3)(f) Wisconsin Statute a prepayment of such costs associated with an open record request in excess of \$5.00 may be required prior to processing such open records request.

### REQUESTER'S INFORMATION (Please Print)

Name: \_\_\_\_\_

Group: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Document to be: ☐ Picked Up ☐ Mailed

Document Requested: \_\_\_\_\_

Reason Requested: \_\_\_\_\_

Acknowledgement that Requester Inspected or Received a Copy of Document Requested.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please allow at least 10 days for information to be researched.  
Your request will be given priority, and you will be notified as soon as the records are available.

Any information given orally or in writing by the Chief of Police may be subject to errors or omissions and shall not be a binding liability upon the Town of Grand Rapids.

<b>Municipal Records Use</b>	
Date Received:	_____
Received By:	_____
Date Completed:	_____
No. of Pages:	_____
Fee Received:	\$ _____
Records Custodian Signature	Date
Remarks/Actions:	