

# Amarillo Police Department

## Information / Records Request Form

**TO: CUSTODIAN OF RECORDS FOR THE CITY OF AMARILLO POLICE DEPARTMENT**

<b>FROM: Name:</b>		<b>ID/DL #:</b>		
<b>Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Telephone No. (Home):</b>		<b>(Work):</b>	<b>(Mobile):</b>	

Pursuant to Texas Government Code, Ch. 552, I am requesting certain information, specifically:

**CHECK ONE BOX**

<input type="checkbox"/>	<b>MADE AVAILABLE TO ME FOR EXAMINATION ONLY.</b> The custodian may schedule an appointment within a reasonable time for my examination of the information. I understand that I must complete my examination within ten days after the date the records are made available to me.
<input type="checkbox"/>	<b>COPIED OR DUPLICATED</b> for me (See back for charges).

**CHECK ONE BOX**

<input type="checkbox"/>	<b>MAILED</b> to me at the address indicated above. (See back for charges.)
<input type="checkbox"/>	<b>PICKED UP</b> by me or my representative when you advise the information is ready.
<input type="checkbox"/>	<b>FAXED</b> to me at <input style="width: 150px;" type="text"/>

I agree to pay the costs of photocopying, duplication, the labor costs involved in retrieving information that is not readily available or in need of redacting, and the cost of mailing or faxing. In the event the estimated cost to satisfy my request exceeds: (a) \$40.00, then I will receive a detailed statement and the opportunity to narrow my request and if I fail or refuse to narrow my request within 10 business days, then my request is deemed withdrawn; (b) \$100 or if I owe over \$100 in unpaid fees for prior requests, then I understand a deposit may be required prior to retrieval of the information I currently seek.

I understand that the City of Amarillo may withhold information, which is not considered public information under the Texas Public Information Act, as interpreted by the Texas Attorney General or the courts. If it is uncertain whether the information is public or not, the City will request an opinion from the Attorney General. I will get a copy of the City's letter to the A.G. requesting an opinion about my request.

I understand that the City is required to release only information, which currently exists, that is in its possession, and in its current state. The City is not required to compile or create specific information or formats for my use. I understand the City will make the information available as soon as reasonably possible, normally no more than 10 business days. Archived records, voluminous requests, and documents requiring redaction of non-public information may require a longer time for processing. I will receive notice of the need for an extension and an approximate time when the documents will be available.

Signature Required: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS SIDE TO BE COMPLETED BY CITY PERSONNEL ONLY:**

(1) Date City Received:	(2) Date City Responded:
(3) Date Picked Up, if applicable:	(4) Payment info:

CHARGES PER ITEM	NUMBER	TOTAL
<b>Standard-size:</b> Paper Copies (up to 8½ x 14) Microfiche - Paper Copies <b>Motor Vehicle Accident Report</b>	_____ @ \$.10/page _____ @ \$.10/page _____ @ \$6.00/each	\$ _____ \$ _____ \$ _____
<b>Nonstandard-size:</b> Diskette Rewritable CD (CD-RW) Non-rewritable CD (CD-R) Digital video disc (DVD) Other electronic media (Actual Cost) Oversize Paper (larger than 8½ x 14) Specialty Paper (Actual Cost) Photographs (Actual Cost) <b>Other Charges:</b> _____	_____ @ \$1.00/ea. _____ @ \$1.00/ea. _____ @ \$1.00/ea. _____ @ \$3.00/ea. _____ @ \$_____/ea. _____ @ \$0.50/page _____ @ \$_____/page _____ @ \$_____/ea. _____ @ \$_____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
<b>Labor charge:</b> For Programming For locating, compiling, reproducing & redacting (More than 50 pages) <b>Overhead Charge – 20% of Labor Charge.</b>	_____ @ \$28.50/hr. _____ @ \$15.00/hr. _____ @ 20%	\$ _____ \$ _____ \$ _____
<b>Computer Resource Charges:</b> Mainframe PC or LAN	_____ @ \$10.00/min. _____ @ \$1.00/hr	\$ _____ \$ _____
<b>Miscellaneous Supplies &amp; Charges:</b> 1) _____ 2) _____ 3) _____	_____ @ \$ _____ _____ @ \$ _____ _____ @ \$ _____	\$ _____ \$ _____ \$ _____
<b>Postage/Shipping Charges:</b>	Actual Cost	\$ _____
<b>TOTAL CHARGES:</b> (No Sales Tax)		\$ _____

Additional Information: