



TUALATIN POLICE DEPARTMENT

POLICE RECORDS REQUEST FORM



- ◆ Please allow up to 15 business days for processing.
- ◆ \$15.00 fee will be due upon release, 1-10 pages (\$.25 fee for each additional page)
- ◆ In the event a case report is not releasable, you will be notified.

TYPE OF REPORT: ACCIDENT CRIME OTHER

DATE OF REQUEST:

CASE NUMBER:

LOCATION OF INCIDENT:

DATE & TIME:

NAME(S) OF PERSON(S) INVOLVED:

DATE(S) OF BIRTH:

PURPOSE OF REQUEST (I certify that I am NOT making this request for the purpose of enforcement of federal immigration laws):

NAME OF PERSON REQUESTING COPY:

RELATION TO INVOLVED PERSON(S):

MAILING ADDRESS:

PHONE NUMBER:

EMAIL ADDRESS:

Must save first, then
submit saved form.

ID ONLY

FOR DEPARTMENT USE ONLY

RELEASABLE:

ID AND PAYMENT

REQUEST NUMBER

YES NO

UPDATE ACCESS

NOTIFIED BY Phone / Email

DATE _____