



Paynesville Police Department

Chief Paul Wegner

Records Request

I am requesting the following records from the Paynesville Police Department:

Incident Number: _____ **Date and Time of the Incident:** _____

Description of the Incident and Individuals Involved:

Name and Address where documents are to be mailed:

Number where documents are to be faxed:

I understand that there is a fee of **\$5.00** per accident report and **\$.25 per page** for all other reports for the research, copying, and postage of the records requested. I understand that the requests for research will be received and processed during normal business hours. I understand that upon receipt of the request, the documents will be provided to me as soon as reasonably possible and I understand that it may take up to 10 business days. I also understand that payment must be made prior to the release of any records.

If there is a request for a waiver of fees, a "Waiver of Fee Request Form" must be completed and presented to the Paynesville City Council for approval. No Information will be released until this request has been approved.

Signature

Date

Signature of Authorizing Agent

Date