



RICE LAKE POLICE DEPARTMENT

Steven G. Roux
Chief of Police

Tracy A. Hom
Captain

34 S. Wilson Ave. • Rice Lake, WI 54868

2014 OPEN RECORDS REQUEST FORM

Request is: Verbal Written Both

PERSON REQUESTING RECORDS:

Name: _____
(Last), (First) (Middle) / Business (if applicable)

Date of Birth: _____

Address: _____

Phone: _____

City/State/Zip _____

Cell Phone: _____

Will Pick Up:

Call When Ready:

Mail:

In Person/View:

RECORD REQUESTED: (CHECK TYPES) Incident/Arrest Accident Other _____

Case Number and/or Date of Incident: _____

Location of Incident: _____

Records Regarding: _____
(Last), (First) (Middle)

Date of Birth: _____

Other(s) Involved: _____
(Last), (First) (Middle)

Date of Birth: _____

Address: _____

Phone: _____

City/State/Zip _____

Cell Phone: _____

Describe Records Requested: _____

The requester must allow the department **10 business days** to process the record request. Dispositions are available from the Rice Lake Municipal Court or from the Barron County Clerk of Court.

Charges/Processing Fees:

MV4000 Crash Report:	\$5.00 (picked up)/\$10.00 (mailed)	\$ _____
Copies of Reports:	\$5.00 (picked up)/\$10.00 (mailed)	\$ _____
Copies of Photos:	\$Actual cost of duplication	\$ _____
Laser Color Copies:	\$2.00 per sheet	\$ _____
Copies of CD/DVD	\$10.00	\$ _____

All costs for copies and photos must be paid prior to release.

I understand this request will become part of the files maintained by the Rice Lake Police Department and is subject to open records. I further acknowledge that release of this information to me does not authorize me to release this information to unauthorized third parties or to otherwise use this information in a negligent or illegal manner.

Signed: _____ Date: _____

(Signature of Requesting Party)

Reviewed by: _____ Date: _____ OK _____ Denied _____ Letter _____

Delivered/Mailed by: _____ Date: _____