## OFFICE POLICE

## **Rangely Police Department**

## **Records Release**

Return the completed form to the Rangely Police Department in person or by the mailing address, email or fax located at the bottom of the form.

Date of Request	Case Number	
Applicant's Name	Applicant's DOB	
Applicant's Phone#		
Applicant's Email		
Applicant's Address		
Type of Report Requested:		
Traffic Accident	Offense/Incident	Other
Custody/Arrest/Summons		
Arrestee/Summons Na	ne:	
Arrestee/Summons DO	3:	
Date of Offense:		
If you do not have a case number p	ease add a description of the incident(s) including the	name of involved
parties, date, location and respond	ng officers if known.	
		6 10 10
business for "pecuniary gain" shall not use and other information in such records. The	stodian-use of records to obtain information solicitation. Any person for the record of official actions and criminal justice records and the names, addre official custodian shall deny any person access to records of official actions at which affirms that such records shall not be used for the direct solicitation.	esses, telephon numbers, s and criminal justice
	ho willfully and knowingly violates the provisions of this part 3 is guilty of a ne of not more than one hundred dollars, or ny imprisonment in the county nent.	
By signing this form, I acknowledge that I h information for solicitation of business pec	ave read and understand the above Colorado Revised State Statute and an niary gain.	n not requesting this
Applicant Signature	Date _	
Request Approved		
Request Denied for the follow	ring Reason:	
Contrary to State Statute		
Prohibited by rules or or		
Contrary to Public Intere		
Individual right to privac Other	y outweighs public right to know	

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