



ARVADA POLICE DEPARTMENT



Request for Police Information

Due to the number of requests submitted, we are not able to process your request immediately

Our goal is to complete all copy requests within 5 to 7 days of receiving written requests / FEES ARE NON-REFUNDABLE

YOUR NAME		DOB	TODAY'S DATE	CASE REPORT# (Leave blank if unknown)	
ADDRESS			CITY	STATE	ZIP
HOME PHONE	WORK PHONE	CELL PHONE	EMAIL ADDRESS		<input type="checkbox"/> TO BE FAXED:
NAME/ADDRESS TO BE MAILED TO: <input type="checkbox"/> SAME AS ABOVE OR <input type="checkbox"/> NAME:					
ADDRESS			CITY	STATE	ZIP

SECTION 1		FOR REPORT, PHOTO, DISPATCH CD, OR ADDRESS SEARCH REQUESTS			
TYPE OF REQUEST:	<input type="checkbox"/> Report* \$5 deposit	<input type="checkbox"/> Photos-\$25/CD	<input type="checkbox"/> Dispatch CD \$10 Deposit	<input type="checkbox"/> Address Search \$10 Deposit	
*COST FOR REPORT: \$5.00 pre-paid per report copy. Additional 25 cents per page over 10 pages. You will be notified if additional fees are incurred.					
TYPE OF REPORT:	<input type="checkbox"/> TRAFFIC ACCIDENT		<input type="checkbox"/> OTHER please specify:		
DATE OF INCIDENT: (Estimate if necessary)			TIME OF INCIDENT: (Estimate if necessary)		
LOCATION OF INCIDENT: (Estimate if necessary)					
PERSONS INVOLVED:	NAME:		NAME:		
	DOB:		DOB:		
YOUR RELATIONSHIP TO ANY JUVENILE NAMED:	NAME(S) OF THE JUVENILE(S):				

SECTION 2		FOR CLEARANCE LETTER (RECORDS CHECK) \$10.00 PER NAME	
FULL NAME		DATE OF BIRTH	
FULL NAME		DATE OF BIRTH	

I AFFIRM THAT THE CRIMINAL JUSTICE RECORDS OBTAINED FROM THE ARVADA POLICE DEPARTMENT UNDER THIS REQUEST WILL NOT BE USED FOR THE DIRECT SOLICITATION OF BUSINESS FOR PECUNIARY GAIN, AND ALSO AFFIRM THAT ANY BOOKING PHOTOGRAPHS OBTAINED UNDER THIS REQUEST WILL NOT BE PLACED IN A PUBLICATION OR POSTED TO A WEB SITE THAT REQUIRES THE PAYMENT OF A FEE OR OTHER EXCHANGE FOR PECUNIARY GAIN IN ORDER TO REMOVE OR DELETE THE BOOKING PHOTOGRAPH FROM THE PUBLICATION OR WEB SITE. SEE: C.R.S. § 24-72-305.5

DATE _____ **SIGNATURE** _____

BELOW FOR THE USE OF APD RECORDS PERSONNEL ONLY					
REQUEST TAKER	DATE	AMOUNT RECEIVED	CIRCLE ONE: CHECK CASH		
		\$			
NOTES FROM REQUEST TAKER:					
DATE/ STATUS ***MAIL DESK USE ONLY***					

REQUEST FILLER	DATE	<input type="checkbox"/> MAILED	<input type="checkbox"/> FAXED	<input type="checkbox"/> PICKUP	<input type="checkbox"/> CALLED