



Central Arizona College Police Department
PUBLIC RECORDS REQUEST FORM

To better serve you, and in order to expedite your request, we ask that you please complete and submit this public records request form. Under provisions of Arizona public records law (A.R.S. 39-121, et seq.), it is request of the Central Arizona College Police Department to release the requested public records to me. **By signing this request below, you are verifying under penalty of perjury that these public records will not be used for commercial purposes.**

Commercial Purpose is defined as "the use of a public record for purpose of sale or resale or for the purpose of producing a document containing all or part of the copy, printout or photograph for sale or the obtaining of names and addresses from public records for the purpose of solicitation or the sale of names and addresses to another for the purpose of solicitation or for any purpose in which the purchaser can reasonably anticipate the receipt of monetary gain from the direct or indirect use of such public record".

Under penalty of perjury, I hereby declare the public records requested will not be used for Commercial Purposes.

Printed Name of Requestor**Signature of Requestor**

Name of Organization**Organization Address**

TYPE OF REQUEST

Accident Report

Criminal Report

Other: _____

PURPOSE OF REQUEST

Insurance

Legal

Other: _____

If the report number is unknown to you, you must give sufficient details for a records search:

Date & Time of Occurrence: _____

Location of Occurrence: _____

Type of Incident: _____

Investigating Officer: _____

Other Parties Involved: _____

Upon completion of review, the requested information will be mailed to you. Please note that processing of requests generally take 1 to 5 business days.

FOR DEPARTMENT USE ONLY

Date Request Received: _____ Date Information Released: _____

Request Handled By: _____ Case No. _____

Total Paid _____ Total Pages Released: _____