Circleville Police Department

151 East Franklin Street
Circleville, Ohio 43113
Police Services (740) 474-8888 • Fax (740) 474-8880

REQUEST FOR PUBLIC RECORD

A written request is not mandatory, and the requestor may decline to reveal the requestor's identity, or the intended use, and when a written request or disclosure of the identity or intended use would benefit the requestor by enhancing the ability of the public office or the person responsible for public records, to identify, locate, or deliver the public records sought by the requestor. **PLEASE NOTE**: Redactions may be required per the Ohio Revised Code. If any requested records are exempt from disclosure, the records, or parts thereof, will be withheld or redacted and you will be provided with a Public Records Redaction Form explaining the redactions. **Per the Ohio Revised Code Section 149.43(B)(6) the requestor cannot make copies of requests received.** Ohio law provides that public records, except certain statutory exceptions, must be available at reasonable times during regular business hours. Upon request, the Circleville Police Department is afforded a reasonable period of time to assemble and organize these records and have an attorney review and authorize each request before it is released. Pages 1 – 5 are at no charge. Anything over 5 pages will be $ .05 per page. Advance payment may be required, including the cost of USPS regular mail postage before any copies are prepared.

Per House Bill 315, body cam requests will be $75.00 per hour, not to exceed $750.00, for the actual time spent redacting and reviewing necessary information per the Ohio Revised Code. Videos will be completed in their entirety. From the date the request is received, the requestor will be notified within 5 working days of the estimated cost for the requested video. Payment will be required before any processing of the video begins. If there is any additional cost for time needed to complete the request, payment will be collected once the request is completed and before the request is sent to the requestor. All video requests will be reviewed and approved for release by the City Law Director. The requests will be handled in the order they are received.

Requestor's Name: _____ Phone # _____

Requestor's Address: _____

Requestor's City: _____ State: _____ Zip: _____

TYPE OF RECORD REQUESTED

Accident [ ] Complaint [ ] Call for Service [ ] Body Cam [ ] Other [ ] _____

List Number if Known: _____

Date Occurred: _____ Location Occurred: _____

Names of Parties Involved: _____

_____

Additional Information for Request: _____

_____

_____

Fax #: _____ Email Address: _____

Mailing Address, if different from above: _____

_____

Reason for Request: _____

Signature of Person Requesting Copies: _____

OFFICE USE ONLY

Estimated Cost for Body, Cruiser and/or Dash Cam Requests

Report #	Officer	Length of Video	Estimate Time to Complete	Estimated Cost	Date Paid	Total Time to Prepare	Total Cost	Payment Due	Date Paid

Record(s) Released

No redaction needed [ ]

Record(s) Released:

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Redaction needed [ ]

Record(s) Released:

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Request: Mail [ ] Fax [ ] Bill Enclosed [ ] Amount Due $_____ Date Mailed/Faxed: _____

Request Received By: _____ Date of Request: _____

Request Completed By: _____ Date Completed: _____

Date submitted for legal review & submitted by: _____

Signature/ Date of Legal Review: _____ [ ] Approved [ ] Denied / Reason _____