

Cedaredge Police Department  
P.O. Box 398 - 140 N.W. 2nd Street  
Cedaredge, Colorado 81413  
Phone: 970-856-4301  
Fax: 970-856-4304



### Records Release Form

Case Number \_\_\_\_\_ Offense \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

**APPLICANT INFORMATION:**

NAME \_\_\_\_\_ DOB \_\_\_\_\_  
Last First MI

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
Street City State

DRIVER'S LICENSE NUMBER \_\_\_\_\_ STATE \_\_\_\_\_

REASON FOR REQUEST \_\_\_\_\_

- Accident Report
- Crime Report/Narrative
- Body Cam

Released by \_\_\_\_\_ Date \_\_\_\_\_

24-72-305.5 Access to Records-Denial by Custodian-Use of Records to Obtain Information for Solicitation. Records of official actions and criminal justice records and the names, addresses, telephone numbers, and other information in such records shall not be used by any person for the purpose of soliciting business for pecuniary gain. The official custodian shall deny any person access to records of official actions and criminal justice records unless such person signs a statement which affirms that such records shall not be used for the direct solicitation of business for pecuniary gain.

By signing this form, I acknowledge that I have read and understand the above Colorado Revised State Statute and am not requesting this information for solicitation of business for pecuniary gain.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

DENIAL OF INSPECTION: Reason for Denial

- ( ) Contrary to State Statute
- ( ) Prohibited by Rules or Order of Court
- ( ) Contrary to Public

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**FEES:**

**Research Fee for All Records Request \$10.00** – Paid at time of request.

Number of pages Records Request: \_\_\_\_\_ x \$ .25 = \$ \_\_\_\_\_

Number of pages Accident Report: \_\_\_\_\_ x \$1.00 = \$ \_\_\_\_\_

Body Cam Video DVD \$5.00 each: \_\_\_\_\_ x \$5.00 = \$ \_\_\_\_\_

Total Due \$ \_\_\_\_\_