



Steven P. Anderson
Jefferson County Sheriff

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PUBLIC RECORDS REQUEST FORM

PLEASE READ CAREFULLY! Jefferson County Sheriff's Office (JCSO) will produce records in accordance with the Idaho Public Records Act, subject to appropriate exemptions. The requesting party is hereby notified as follows:

- JCSO is only required to produce records in existence, not create records or answer questions (I.C. §§ 74-102 and 74-101(13));
- Unless otherwise notified, JCSO will approve or deny requests within **three (3)** working days of receipt (I.C. § 74-103);
- Once JCSO contacts you, you will have **five (5)** working days to retrieve your information;
- **Requests for information on behalf of a criminal defendant for an open/pending case, must be sought through discovery in the criminal case, not through this public records request (I.C. § 74-115(3)); AND**
- If your request is denied in whole or in part for any reason below, you have the right to appeal any denial to the 7th District Judicial Court within 180 days of the date of the denial (I.C. § 74-115).

REQUESTOR INFORMATION

NAME _____ DL# _____

(PRINT)

COMPANY _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE/CELL# _____ FAX # _____

E-MAIL _____

SIGNATURE OF REQUESTOR _____ DATE _____

I acknowledge by my signature that the records sought by this request will not be used for a mailing or telephone list (I.C. § 74-120)

REQUESTED RECORDS

I hereby request, pursuant to I.C. § 74-102, to examine and/or copy the following public records:

DATE OF INCIDENT _____ LOCATION _____

PARTIES INVOLVED _____

ADDITIONAL INFORMATION _____

____ THESE RECORDS SPECIFICALLY PERTAIN TO MYSELF _____ INCIDENT REPORT-CASE# _____

____ I MERELY WISH TO EXAMINE THESE RECORDS _____ PHOTO OF ACCIDENT SCENE (Photos will be on a CD/\$5 charge)

____ I WISH COPIES OF THESE RECORDS _____ AUTOMOBILE ACCIDENT- CASE# _____

DO NOT WRITE IN THIS SPACE - OFFICIAL USE ONLY:

Received by Custodian of Records: _____ Full Release: _____

Number of Pages: _____ Photos: _____ Audio: _____ EIMPACT: _____

Date completed: _____ Partial Release: _____

E-mailed Mailed Faxed Hand Delivered

IF DENIED, PROSECUTOR REVIEW:

____ Access is Denied Pursuant to I.C. § 74- _____ AND § 74- _____;

____ Access is partially granted as to _____ and denied as to _____ pursuant to I.C. § 74- _____;

____ Granted no redactions; OR

____ Granted with redactions per I.C. § 74-106(28)

PROSECUTOR SIGNATURE _____ DATE _____