



POLICE REPORT REQUEST

Tulalip Police Department
6332 31st Ave NE, Suite A
Tulalip, WA 98271
Emergency 360-716-9911
Non-Emergency 360-716-4608
360-716-5999 - Fax

Date: _____

REQUESTOR INFORMATION

Name: _____

Agency: _____

Phone: _____

INCIDENT INFORMATION

Case Number: _____

Date Occurred: _____

Names Involved: _____

Address Where Occurred: _____

Incident Type: _____

Reason for Request: _____

We are requesting that Tulalip Police Department release arrest and/or investigation records for official use only.

There is a \$10.00 fee for a Police report, if pictures needed with report add \$20.00 totaling \$30.00 dollars.

I understand that it will take Tulalip Police Department up to 10 business days to honor my request for the release of these records.

I understand that Tulalip Police Department records are protected under 5 United States Codes Sections 551 and 552 and that we cannot and will not use the information from these records for any unofficial use or reveal their contents to any persons, without official purpose.

This request is made in accordance with the above information. Our need for records is official purposes only and no disclosure will be made to anyone without official statutory purpose.

(Printed Name of Requestor)

(Signature of Requestor)