



Police Department
9075 N. Regent Road • Bayside, WI 53217
P (414) 206-3916 F (414) 351-8810
www.baysidewi.gov

REQUEST FOR RECORDS

Wisconsin Open Records Law – Chapter 335 – Laws of 1981

Notice to requestors: Pursuant to Chapter 335- Laws of 1981, you are not required to provide your name, address, email address, fax or phone number to receive a department record, however, this information is useful in getting the requested information to the correct person and clarifying any ambiguities to the request.

Requestor's Name _____ Date _____

Telephone number _____ Email address _____

Address _____ Fax Number _____

City _____ State _____ ZIP _____

Specific Records Requested: Include date(s), time(s), incident number(s), name(s), location(s) if available

How would you like to receive your request if approved? USPS Mail [] Fax [] Email [] In-person []

OFFICE USE ONLY-DO NOT WRITE BELOW

Date Request Received: _____ Time: _____

Incident or Crash #: _____

Request made via: Mail [] Fax [] Email [] In-Person [] Other: _____

Request Approved: Yes [] No [] Authority: _____

If denied, reason for denial: _____

COST TO REQUESTOR:

Copies – Standard Sheet of Paper _____ @\$0.25 per page = \$ _____

Accident Report _____ @\$6.50 per report = \$ _____

DVD Audio only _____ @\$15.00 per copy = \$ _____

DVD Squad/Body Camera _____ @\$35.00 per copy = \$ _____

USPS Mailing/Shipping Costs _____ \$ _____

TOTAL REPRODUCTION COSTS \$ _____

Charges in excess of \$5.00 must be paid in advance unless other arrangements are made.
Payments can be made: online at https://ipn.paymentus.com/rotp/vudx use down arrow to select Report, or by check made payable to the Village of Bayside for the exact amount.