



La Plata County Sheriff's Office

Application for the Release of Criminal Justice Records

I, _____, request the release of :

- Records of Official Action (Records Check)
 Other Criminal Justice Records (Deputy Reports Criminal or Traffic)

Date of Request _____ Time of Request _____

The following information is needed to identify the correct record.

Incident Number: _____ Case Report # : _____

Date of Incident: _____ Time of Incident: _____

Location of Incident: _____

Person the Report Involves: _____ DOB: _____

Address: _____

City: _____ State: _____ Zip: _____

Requestor's Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Note: According to Colorado Revised Statute 24-72-305.5, records of official action , criminal justice records, or 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 Records 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.

Signature: _____ Date: _____

Signature of Records Technician: _____ Date: _____

For Official Use Only

I.D. Verified Yes No Number of pages released _____

Inspection Granted Yes No Total \$ Amount Charged _____

If Inspection Denied - Reason: _____

Revised 10/00

Fax completed document to: (970) 247-1618