

# FOUNTAIN POLICE DEPARTMENT

CHRIS A. HEBRER  
CHIEF OF POLICE

**Records will be released within 3 business day after the report is completed.**

**(Please note that not all reports are releasable)**

Name \_\_\_\_\_ Contact Phone \_\_\_\_\_

Address \_\_\_\_\_ Alt Contact Phone \_\_\_\_\_

Reason for request/Relationship to incident \_\_\_\_\_

Method to receive records? In person Email or Fax \_\_\_\_\_

Type of record:

PD CASE REPORT (\$10) TRAFFIC ACCIDENT REPORT (\$10) FIRE INVESTIGATION (\$6)

**\*\*PHOTOS AND BODY WORN CAMERA IS REQUESTED ON A SEPARATE FORM\*\***

Case Report Number \_\_\_\_\_ Date of Occurrence \_\_\_\_\_

Type of Case \_\_\_\_\_ Person(s) Involved \_\_\_\_\_

Address of Occurrence \_\_\_\_\_

PREMISE HISTORY (\$10)

Address we responded to \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_

CITY OF FOUNTAIN BACKGROUND CHECK (\$20)

Full legal name of person \_\_\_\_\_

Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_

**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 Colorado Revised Statute above.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**IMPORTANT – PLEASE READ: Any copies of requested records will be held for 90 days. If not picked up within 90 days the copies will be destroyed and will need to be re-ordered. Email request to: [supportservices@fountainpd.com](mailto:supportservices@fountainpd.com)**

**\*You will be called with a total \$ to be paid at pickup. Payment must be made prior to release\***

FOR DEPARTMENT USE ONLY:

ID VERIFIED BY \_\_\_\_\_ RECORDS RELEASED BY \_\_\_\_\_ TOTAL DUE \$ \_\_\_\_\_

RELEASE METHOD:  IN PERSON  MAIL  EMAIL  FAX RELEASED DATE/TIME \_\_\_\_\_

NOTES: \_\_\_\_\_

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