



Wasilla Police Department  
 801 N Wasilla-Fishhook Rd  
 Wasilla, AK 99654  
 P: 907.352.5401 F: 907.357.7877  
 E: [wpdadmin@cityofwasilla.gov](mailto:wpdadmin@cityofwasilla.gov)



## PUBLIC RECORDS REQUEST

Name: \_\_\_\_\_ ID/OL# & State: \_\_\_\_\_ Date of Request: \_\_\_\_\_  
 Organization/Company: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Date & Time of Occurrence:	Type of Report: Collision Report <input type="checkbox"/> Dispatch Log <input type="checkbox"/> Officer Report <input type="checkbox"/> Audio/Photos <input type="checkbox"/> Other (indicate below) <input type="checkbox"/>	Report/Case Number:
Location of Incident:	Name of Involved Party:	

### Additional Information

Please use the space below to detail any additional information you are requesting. You can also attach a separate sheet if needed.

### ACKNOWLEDGEMENT OF PAYMENT AND CERTIFICATE OF NON-LITIGATION AFFILIATION

I understand I will be charged a pre-paid nonrefundable fee of \$20 for digital media, \$10.00 per Collision/Officer report, or \$5.00 per Dispatch (CAD) Log. If the report or log exceeds 10 pages, there may be an additional fee of \$0.35 per page.

If it is determined that my request will require more than five hours of staff time to prepare, I will be notified of the personnel costs required to complete each task and/or copying tasks. I further understand that the Police Department must respond to the request within 10-business days after receiving my request, except the Department may take an extension of an additional 10-business days if needed for review or investigation. I further understand that this request is available for public review and will be kept on file in accordance with City records policy. ***If the record or report that I am requesting is not completed at the time of my request, I understand that my request becomes effective on the date the record or report is complete.*** I understand that if the report involves criminal charges, it will not be available for release until unrestricted by the District Attorney. ***I understand that in incidents involving a collision, that only the collision report will be released until adjudication of criminal charges.***

I hereby certify that I am not involved in litigation with the City of Wasilla or another public agency to which the requested record is relevant and I am not acting on behalf of or otherwise representing any person who is involved in litigation with the City of Wasilla or another public agency to which the requested record is relevant. I certify under penalty of perjury, that the foregoing statements are true.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

#### ADMIN USE ONLY

Received by: \_\_\_\_\_ Date Done: \_\_\_\_\_ \$ Received: \_\_\_\_\_ Cash or Check #: \_\_\_\_\_  
 REQUEST DENIED  Reason: \_\_\_\_\_ Requester Advised:   
 Picked Up:  E-Mailed:  Faxed:  Mailed:  Other: \_\_\_\_\_