



# SHENANDOAH POLICE DEPARTMENT

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[www.shenandoahtx.us](http://www.shenandoahtx.us)



## REQUEST FOR INFORMATION

### Requestor Information - Please Print

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Identification (type): \_\_\_\_\_ Identification number: \_\_\_\_\_

### Report Information - Please be Specific

Under the Texas Public information Act, Chapter 552 of the Government Code, I request copies of, or access to:

- **Accident Report** (case number) \_\_\_\_\_ \$6.00 ea  
 If requesting an Accident Report with an unknown case number, you **must** provide two (2) of the following pieces of information:
  1. Date of Accident: \_\_\_\_\_
  2. Location: \_\_\_\_\_
  3. A Person Involved: \_\_\_\_\_
- **Police Report** (case number) \_\_\_\_\_
- **Other** (please specify) \_\_\_\_\_ DVD/CD/\$2.50 ea
  1. Date of Incident \_\_\_\_\_
  2. Citation Number: \_\_\_\_\_
  3. Person(s) Involved \_\_\_\_\_
  4. Officer Involved \_\_\_\_\_

**I am not requesting any information that is confidential as a matter of law, and I understand that this information (e.g. Texas driver's license number, social security number, telephone numbers and addresses) will be withheld.**

*Section 552.021 of the Texas government Code provides that public information is available to the public during normal business hours of the governmental body. The officer for public information will respond to your request within 10 business days after the date the information request is received.*

I understand that a fee may be due before the information can be released. Written notification will be provided if additional time is required. Fees will vary depending on how I request to receive the information and the availability of information.

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

### Office Use Only

Request received on \_\_\_\_\_, at \_\_\_\_\_ AM/PM    Prepared by \_\_\_\_\_  
 Patron notified on \_\_\_\_\_, at \_\_\_\_\_ AM/PM    Picked up/ mailed / faxed on \_\_\_\_\_, at \_\_\_\_\_ AM/PM