

REQUEST FOR COPY OF RECORDS

Directions:

- Complete this form online and print out or print out a blank copy and write out by hand.
- Place this form and \$5.00 per copy requested into a self addressed and stamped envelope.
- Print the complete mailing address, to which you wish the copy sent, on the front of the envelope.
- Turn the completed envelope, form ,and money into the desk officer. Or mail a check or money order with the form to : Police Records 6000 Middlebelt Rd, Garden City , Michigan 48135
- If the Records Bureau cannot fill your request, you will be contacted at the phone number you list below. Or the fee will be returned in the self addressed and stamped envelope.

Name of Requesting Person:

Daytime Phone Number:

Incident Number of Report Requested:

Name of Person(s) in the report (if other than requestor):

Date of Incident:

Location of Incident:

Type of Incident:

Number of Copies Requested:

Dollar Amount Enclosed:



Chief Kimberly Scott
Garden City Police Department
6000 Middlebelt Road
Garden City, MI 48135
734-793-1700 fax 734-793-1701