

STEAMBOAT SPRINGS POLICE SERVICES
P.O. Box 775088 – 840 Yampa Street
Steamboat Springs, CO 80477- 5088
Telephone#: (970) 879- 4344 FAX#: (970) 870- 1271

ADVISEMENT AND INSTRUCTIONS FOR REQUESTED RECORDS CHECKS AND/OR REPORT COPIES

The instructions contained herein are drawn from and based upon the Freedom of Information Act, The Privacy Act, and the Colorado Revised Statutes, Article 72 of Title 24 and others, and the Steamboat Springs Police Services Policy and Procedure #15.5.

This application is for release of information and records maintained by the Steamboat Springs Police Services Department ONLY.

I. RECORDS INQUIRY AND REQUEST

- a) Request forms are available to the public and may be received at the front desk of the Steamboat Springs Police Services Department, 840 Yampa, Steamboat Springs, CO Monday through Thursday, except holidays, between the hours of 8:00 a.m. and 5:00 p.m. A faxed or emailed copy can also be received. These forms are also available online at: www.steamboatsprings.net.
- b) Persons making requests must fill out and sign the appropriate request form and pay the appropriate fee(s) before the request can be processed. Separate requests must be made for each named person or report copy requested and a separate search fee collected for each request.
- c) There will be no charge to Criminal Justice Agencies and their agents conducting official investigations. Further, Criminal Justice Agencies may be exempt from the completion of the form. The Records Custodian may make exception to all rules.
- d) There will be no FAXING or EMAILING of criminal justice records.

II. FEE SCHEDULE (Note: fees may be waived at the discretion of this Department.)

- a) Records Search..... \$5.00
(fees for lengthy searches will be assessed an hourly rate of \$10.00/hour)
- b) Traffic Accident Reports and Incident Reports \$5.00
- c) Offense Reports: Search, Retrieval & Copies..... \$5.00
 Over 10 pages, per page charge \$0.25
- d) Certified copies (per page) \$1.00
- e) Photographs (4 color photos per page) \$5.00
- f) CD (copies of photos etc.) \$5.00

Each records request will be considered in light of the existing laws and circumstances known at the time of the request. The applicant will be advised within three (3) working days if the release or access will be permitted or denied. In the event the request is denied, the applicant may appeal in writing to the Custodian of Records or the Chief of Police. In the event release or access is again denied, appeal may be made to the District Court of the 14th Judicial District.



Steamboat Springs Police Services

RECORDS CHECK REQUEST FORM

SSPD Case#: _____

Please fill out this form, sign, date, and return with fee. Requestor will be contacted if payment in excess of the above is required. (See Fee Schedule)

Return form to: **Steamboat Springs Police Services** or **FAX #: 970-870-1271**
ATTN: Records Division
P.O. Box 775088 **Call for email address**
Steamboat Springs, CO 80477 **Phone #: 970-879-4344**

***Please note we cannot email or fax records checks.**

Or pay by credit card – the City of Steamboat Springs accepts the following credit cards:

Check appropriate type: VISA MasterCard Discover

Credit card number: _____ Expires: _____(Month)_____(Year)

CCV Number: _____ Name as it appears on card: _____

Search of Records pertaining to individual:

For time period of: _____

For the purpose of: _____

- Complete records check - all contacts with SSPD only
 Criminal violations maintained by SSPD only

NAME OF SUBJECT: _____

DOB (**required**): _____ AKA (s): _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

HOME TELEPHONE #: _____ SOCIAL SECURITY #: _____

SUBJECT'S EMPLOYMENT: _____

*If requestor is the same as subject above in Name of Subject to be searched, do NOT fill out the following. If requestor is not the same as above, be advised that the subject to be searched will be notified of search and requestor must complete the following information:

REQUESTOR'S NAME: _____ DOB: _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

CONTACT PHONE #: _____ SOCIAL SECURITY #: _____

EMPLOYMENT: _____ PHONE # _____

NOTE: According to Colorado Revised Statute 24-72-305.5, "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."

*I have reviewed and/or received copies of the records described above and I agree that I will not use this information for the purpose of soliciting business for pecuniary gain as stated above.

REQUESTOR'S SIGNATURE: _____ Date: _____

BELOW TO BE COMPLETED BY RECORDS TECHNICIAN/SUPERVISOR – FOR OFFICIAL USE ONLY

ID VERIFIED: YES NO INSPECTION GRANTED: DENIED: CHRI LETTER COMPLETED:
REQUESTOR NOTIFIED: BY PHONE: BY MAIL: BY EMAIL:

NUMBER OF PAGES RELEASED: _____ DATE: _____ TIME: _____ FEES COLLECTED: _____
RECORDS TECHNICIAN: _____ SUPERVISOR'S APPROVAL: _____