

RECORD OR INFORMATION REQUEST

You are not required to complete this form to make a public records request, or to list your name, phone number, etc. [per ORC 149.43 (B)(5)] However, completing this form will help in locating the requested information and to contact you if there is a question about your request, as well as notifying you when your request is finished.

Contact Name: _____

Contact Phone No: (____) _____

***Note: Business hours for the Records Section are Monday – Friday, 8:00 am – 4:30 pm, and closed on legal holidays.**

A request for records or information can be made by:

In Person: Records desk located in the lobby of the Fairfield Township Police Department

Telephone: 513-887-4406

Fax: 513-887-4407

E-mail: policerecords@fairfieldtwp.org

In order to process your request we need the following information to assist us in finding the record/information:

Type of report (e.g. traffic crash, burglary, etc.):

Date, time and location of incident:

The name(s) of persons involved:

Please describe the record(s) you are looking for:

Method you want to receive the record(s):

Pick up at the police station

Fax to: (____) _____

E-mail to: _____