



# PARMA POLICE DEPARTMENT

105 N. 4<sup>th</sup> Street Parma, Idaho 83660  
(208) 722-5900 Fax (208) 722-5139

## REQUEST FOR POLICE RECORDS

*Request subject to fees collected in accordance with Idaho Code*

### REQUESTOR

Please identify yourself and tell us how to notify you regarding this request. PLEASE PRINT

Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

Birthdate \_\_\_\_\_ Driver License/State \_\_\_\_\_ / \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

<b>Date and time of occurrence:</b> known)	<b>Type of report:</b> <input type="checkbox"/> Incident <input type="checkbox"/> Crime <input type="checkbox"/> Other <input type="checkbox"/> Traffic Collision	<b>Report or Case number (if</b>
<b>Location of incident:</b>	<b>Name of driver, property owner, or involved person</b>	

### What is your involvement in this case / incident? (Check one)

- |   |  |
|---|--|
| <input type="checkbox"/> Victim                                 | <input type="checkbox"/> Insurance Representative                                      |
| <input type="checkbox"/> Driver, Passenger, Pedestrian          | <input type="checkbox"/> Authorized Individual (Signed authorization <u>REQUIRED</u> ) |
| <input type="checkbox"/> Property Owner                         | <input type="checkbox"/> Attorney (Signed authorization <u>REQUIRED</u> )              |
| <input type="checkbox"/> Defendant                              | <input type="checkbox"/> Other party of interest ( <u>SPECIFY BELOW</u> ) ▼            |
| <input type="checkbox"/> Parent / Guardian of involved juvenile | _____  |
| <input type="checkbox"/> Witness                                |  |

### DOCUMENTS REQUESTED

Identify and describe the documents you are requesting. BE SPECIFIC

\_\_\_\_\_  
\_\_\_\_\_

**I.C. 74-105.** Records exempt from disclosure — Law enforcement records, investigatory records of agencies, evacuation and emergency response plans, worker's compensation. The following records are exempt from disclosure:

- (1) Investigatory records of a law enforcement agency, as defined in section 74-101(7), Idaho Code, under the conditions set forth in section 74-124, Idaho Code.

**I.C. 74-124.** Exemptions from disclosure — Confidentiality.

(1) Notwithstanding any statute or rule of court to the contrary, nothing in this chapter nor chapter 10, title 59, Idaho Code, shall be construed to require disclosure of investigatory records compiled for law enforcement purposes by a law enforcement agency, but such exemption from disclosure applies only to the extent that the production of such records would:

- (a) Interfere with enforcement proceedings;
- (b) Deprive a person of a right to a fair trial or an impartial adjudication;
- (c) Constitute an unwarranted invasion of personal privacy;
- (d) Disclose the identity of a confidential source and, in the case of a record compiled by a criminal law enforcement agency in the course of a criminal investigation, confidential information furnished only by the confidential source;
- (e) Disclose investigative techniques and procedures;
- (f) Endanger the life or physical safety of law enforcement personnel; or
- (g) Disclose the identity of a reporting party maintained by any law enforcement entity or the department of health and welfare relating to the investigation of child abuse, neglect or abandonment unless the reporting party consents in writing to the disclosure or the disclosure of the reporting party's identity is required in any administrative or judicial proceeding.

(2) Notwithstanding subsection (1) of this section, any person involved in a motor vehicle collision which is investigated by a law enforcement agency, that person's authorized legal representative and the insurer shall have a right to a complete, unaltered copy of the impact report, or its successors, and the final report prepared by the agency.

**By reading the above Idaho Code; I understand that just because I have requested a report(s) and/or document(s), does not necessarily entitle me to receive them.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

▼ **DO NOT WRITE BELOW THIS LINE** ▼

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Request referred to: \_\_\_\_\_

Requestor notified: \_\_\_\_\_

Denied by: \_\_\_\_\_ Date: \_\_\_\_\_

Documents released: \_\_\_\_\_ Fees calculated: \_\_\_\_\_