

**BLOOMINGTON POLICE DEPARTMENT**

**REQUEST FOR PUBLIC INFORMATION**

**Audio/Video Recordings**

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail (*print clearly*) \_\_\_\_\_@\_\_\_\_\_

*(Audio/video files cannot be emailed. If you are unable to pick up the recording(s), and wish the CD(s) mailed to you, please provide a self-addressed, postage-paid envelope that will hold one or more compact discs.)*

**Requesting Video Recording:**

**The FEE for this service** (not to exceed \$150 per officer recording) **is calculated based upon the actual cost to search, log, download, review, upload, edit/redact and process each video associated with the incident requested. Therefore, the more videos to process for the incident, the higher the cost.** *(An estimate of approximately 50-60 minutes of video time will cost roughly \$100.)*

“Law Enforcement Recording” is defined by IC 5-14-3-2(k) as:

An audio, visual or audio/visual recording of a law enforcement activity captured by a camera or other device that is (1) provided to or used by a law enforcement officer in the scope of the officer’s duties; and (2) designed to be worn by a law enforcement officer or attached to the vehicle or transportation of a law enforcement officer.

I am seeking Law Enforcement Recording(s) for Case number **B** \_\_\_\_\_:

\_\_\_\_ Body Camera                      \_\_\_\_ Dash/Car Camera                      \_\_\_\_ Radio Traffic

Per IC 5-14-3-3(i)(1-3) you must provide the following information regarding the recording:

Date and Approximate Time of the Incident: \_\_\_\_\_

Specific Location/Address of the Incident: \_\_\_\_\_

Name of 1 individual who was directly involved (other than the officer): \_\_\_\_\_

***NOTE: Upon receiving this completed form, the Bloomington Police Department will review its recordings to determine if the requested recordings exist and are disclosable, and will contact you to advise our determination. If your request is denied, you will be given written notice of the statutory authority for the denial, and the name and title/position of the person responsible for the denial.***

When completed, all recordings will be available for pick up at the Bloomington Police Department lobby during lobby hours of 8:00 am to 4:00 pm, Monday through Friday.

Signature \_\_\_\_\_ Date of Request \_\_\_\_\_ Time \_\_\_\_\_

**\*\*\*OFFICE USE ONLY\*\*\***

COMPLETED DATE: \_\_\_\_\_ PIN: \_\_\_\_\_

Contacted by: \_\_Mail \_\_ Phone \_\_E-mail on \_\_\_\_\_ at \_\_\_\_\_ hrs.

Items Provided:      \_\_ Dash Cam    \_\_ Body Cam    \_\_ Radio Traffic    \_\_ Letter of Denial

PAID:    \_\_ No Charge    \_\_Cash    \_\_Check    \_\_Credit    Amount Paid \$ \_\_\_\_\_