BLOOMINGTON POLICE DEPARTMENT
REQUEST FOR PUBLIC INFORMATION

Name______________________________________________ Phone #_________________________________
Address____________________________________________ E-mail__________________________________
City____________________________________ State___________ Zip___________________

Requesting Report Copy:  (If you do not know the Case/CFS number the lobby clerk will assist in locating that information.)

___ I am seeking Daily Log information on Case/CFS#_________________________________________________

Daily log information as listed under IC 5-14-3-5 consists of:
- Arrested, summoned or jailed person's name, age and address; charges on which the arrest or summons is based; circumstances including time and location; and investigating or arresting officer and agency.
- Daily log of suspected crimes, accidents or complaints including:
  - Time, substance and location of all complaints or requests for assistance received by BPD, and the time and nature of its response to them.
  - If incident is an alleged crime or infraction:
    - Time, date and location of occurrence; name and age of victim, unless the victim of a sex offense as listed under IC 35-42-4; factual circumstances surrounding the incident; and general description of injuries, property or weapons involved.

___ I am seeking a copy of the full police report* on Case/CFS#_________________________________________

* The Bloomington Police Department processes Requests for Public Information in compliance with the Indiana Access to Public Records Act, Indiana Code 5-14-3. That statute allows law enforcement agencies to withhold investigatory records under IC 5-14-3-4(b)(1), and the Bloomington Police Department does not provide copies of investigatory records. However, IC 5-14-3-5 (listed above under Daily Log information) requires law enforcement agencies to provide certain records upon request which include Arrest and Daily Log information.

___ I am seeking other (Please be specific.)____________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Requesting Data Search/Statistics:

Date Span of Search//From:_______________To:_________________ $5.00 per hour / (Initial $5.00 fee to start search)

Please be specific. Detail the information you are searching (location, person, type of calls/crimes, etc.) If searching a geographical area, list each street name and the block to block numbers for each street in the entire search area.

_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Requesting Photos and/or Recordings:

Case/CFS# ____________________________ Photographs $0.31 per CD
Case/CFS# ____________________________ Audio Recording $0.31 per CD

Please use Audio/Video Recordings request form for any video requests. Price will vary based on request.

Continued on Back Page.
NOTE: Upon receiving this completed form, the Bloomington Police Department may need to review its files to determine if the requested records exist and are disclosable, and will contact you soon thereafter to advise you of its determination. If your request is denied, you will be given written notice of the statutory authority for the denial and the name and title of the position of the person responsible for the denial.

Signature_______________________________________ Date of Request____________________ Time___________

***OFFICE USE ONLY***

COMPLETED DATE:______________________________ PIN:________________

Contacted by: Mail___ Phone___ E-mail___ Other____________________________

Contacted On Date: _______________ at Time: _______________ Letter Provided ___

PAID: ___ No Charge ___Cash ___Check ___Credit Amount Paid $_____________