

# INFORMATION RELEASE REQUEST FORM



To submit a request for information, complete the **INFORMATION RELEASE REQUEST FORM** on the following page with as much information as possible. Please include the type of incident (wreck, robbery, fire, etc.), date and time of the incident, and location of the incident. Also indicate the type of information desired – copy of phone call, printed copy of call information, etc. The requesting party will be contacted regarding fees involved. Fees will not be charged for examination of public records during normal business hours.

**PLEASE NOTE:** *Per Louisiana Revised Statute 44:3, for any incident for which there is a pending criminal court case or for which a criminal court case is not public record, records may only be obtained through court order or subpoena.*

## TANGIPAHOA 911 CONTACT INFORMATION



### OFFICE

211 Campo Ln.  
Amite, LA 70422



### MAIL

PO Box 505  
Amite, LA 70422



### PHONE

P: (985) 747-0911  
F: (985) 748-8977

[inforequest@tangi911.org](mailto:inforequest@tangi911.org)

*Form on the next page. Please allow 72 hours for this information to be obtained by our office. Thank you.*

# INFORMATION RELEASE REQUEST FORM



DATE: \_\_\_\_\_

## REQUESTOR INFORMATION

Requestor's Name		Business/Agency		
_____		_____		
Address				
_____				
City		State	Zip Code	
_____		_____	_____	
Email		Phone	Ext.	
_____		_____	_____	
Fax	Attn:			
_____	_____			
Reason for Request				
_____				

## INFORMATION REQUESTED

Request Type		Case/Incident Number		
Log Sheet	Recording		_____	
Date of Call	Time of Call		Call Type	
_____	_____		_____	
AM		PM		
_____		_____		
Caller's Phone No. <i>(from which call originated)</i>		Caller's Name <i>(or name under which the phone number is listed)</i>		
_____		_____		
Location of Call				
_____				
Location of Incident <i>(if different from call location)</i>				
_____				
Names of Involved Parties				
_____				
Description of Incident				
_____				

\_\_\_\_\_  
*Authorized Signature* \_\_\_\_\_  
*Title*

## FOR OFFICE USE ONLY

Obtained By	Date	Approved By	Date
_____	_____	_____	_____