



BOUNTIFUL CITY POLICE DEPARTMENT

805 South Main Street

Bountiful, UT 84010

Records (801) 298-6056 | policerecords@bountiful.gov



— Records Request —

Note: Utah Code § 63G-2-204 (GRAMA) requires a person making a record request furnish the governmental entity with a written request containing the requester's name, mailing address, daytime telephone number (if available); and a description of the record requested that identifies the record with reasonable specificity.

Requestor's Name: _____ Daytime Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

In accordance with the Government Records Access and Management Act, I am requesting:

Type of Record Requested: _____ Case Number: _____

Date/Time of Occurrence: _____

Location: _____

Person Involved: _____ Date of Birth: _____

Person Involved: _____ Date of Birth: _____

Check applicable box:

I am the subject of the record.

I am the authorized representative of the subject of the record.

I provided the information in the record.

Other (If so, explain): _____

I understand that in accordance with the Bountiful Police Department, I am responsible for the applicable fees:

- Records / Incidents \$10.00 per record (additional fees may apply)
- Photos \$50.00
- Audio / Video \$50.00 (A prepayment of \$50 and email address is required)

If the record requires an excessive amount of time to research and prepare copies (longer than 30 minutes), you may be charged at a rate that is allowed by G.R.A.M.A.

I also understand that as soon as reasonably possible, but no later than ten (10) business days after signing this request, I will be notified whether my request was approved or denied. I also understand that State photo identification will be required before the record is released to me. After a requested record is prepared, it will be held by the Bountiful Police Department Records Division for thirty (30) days. After that time, the copy will be destroyed.

The majority of records maintained by the Bountiful Police Department are classified as private, protected, controlled, or exempt, in accordance with the Government Records Access and Management Act.

Explain the purpose of your request: _____

Signature: _____ **Date Signed:** _____



Records Request Continued



For office use only:

Your request has been denied for the following reason(s):

- Private in accordance with UCA § 63G-2-302 or 63G-3-302.S
- Protected in accordance with UCA § 63G-2-304
- Controlled in accordance with UCA § 63G-2-303
- Exempt in accordance with UCA § 41-6a-404

As per the Government Records Access and Management Act, you have the right to appeal this records request denial. The appeal must be filed with the City Managers Office with in 30 days of this notice. A notice of decision will be provided to you within five (5) business days.

Do you wish to appeal this decision at this time?

Yes

No

If you marked yes, indicate below what relief you are seeking. You may also include any supporting information with your notice of appeal.

Requestor's Signature: _____ Date Signed: _____