MAINE STATE POLICE

INCIDENT INVESTIGATION REPORT REQUEST FORM (PLEASE PRINT)

If you wish to receive component(s) of a Maine State Police Investigative file other than the Investigative Report you have requested, **Please attached and forward with this form a letter specifying which component(s) you wish to request.** Please note that additional fees will be charged for any such other component(s) that are provided. *See* 1 MRSA § 408-A(8).

1 Name: (Please print full name) 2 Mailing address: (Btreet. CityTown, Zip Code) 3 Street address: (Street cityTown, Zip Code) 4 Tele. Number:
(Street, City/Town, Zip Code) 3 Street address: (Street City/Town, Zip Code) 4 Tele. Number:
(Street City/Town, Zp Code) 4 Tele. Number: 6 Please send report via (please check <u>one</u>): E-mail Fax Postal Mail 7 Incident date and location: 8 Brief description of incident (including, if available, names/DOB of individuals involved) 9 Incident Number(s): 10 I am requesting this incident investigation report for: (check <u>one</u> below) – FOR MYSELF: ON BEHALF OF: (PRINT NAME):
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7 Incident date and location: 8 Brief description of incident (including, if available, names/DOB of individuals involved) 9 Incident Number(s): 10 I am requesting this incident investigation report for: (check one below) – FOR MYSELF: ON BEHALF OF: ON BEHALF OF: (PRINT NAME):
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9 Incident Number(s): 10 I am requesting this incident investigation report for: (check one below) – FOR MYSELF: ON BEHALF OF: Image: Content of the second
10 I am requesting this incident investigation report for: (check <u>one</u> below) – FOR MYSELF: ON BEHALF OF: ON BEHALF OF: (PRINT NAME):
10 I am requesting this incident investigation report for: (check <u>one</u> below) – FOR MYSELF: ON BEHALF OF: Image: Comparison of the second
11 I am requesting this incident investigation report for the following reason(s):
I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION I HAVE PROVIDED ABOVE IS CORRECT.
SIGNATURE: DATE:
NOTE:
UNDER MAINE LAW, MAINE STATE POLICE INCIDENT INVESTIGATION REPORTS ARE CONFIDENTIAL AND MAY NOT BE RELEASED TO THE PUBLIC IF THERE IS A REASONABLE POSSIBILITY THAT DOING SO WOULD RESULT IN CERTAIN CONSEQUENCES IDENTIFIED IN APPLICABLE STATE LAW. SEE 1 MRSA § 402(3)(A); 16 MRSA § 804. ACCORDINGLY, PLEASE NOTE THAT THE MAINE STATE POLICE MAY BE PROHIBITED BY LAW FROM RELEASING TO YOU THE REPORT YOU HAVE REQUESTED FROM OUR AGENCY, OR COMPONENTS OF REQUESTED REPORTS MAY BE REDACTED OR EXCLUDED IN ORDER TO COMPLY WITH EXISTING STATUTES.
NOTE: The fee for each requested report is ten
dollars (\$10). We only accept checks or money Maine State Police
orders; made payable to " <u>Treasurer, State of</u> 45 Commerce Drive
Maine" Thank you! 43 Commerce Drive *Please note that requested records may not be released until any payment 43 Commerce Drive 42 State House Station 42 State House Station Augusta, ME 04333-0042 43 State House Station

due is received.