



**Jackson Police Department**  
**Police Chief Michelle Weber**  
 PO Box 1687 / 150 East Pearl Avenue  
 Jackson, Wyoming 83001

www.jacksonholepolice.com  
 307-733-1430 phone  
 307-733-3241 fax  
 jpdic@jacksonwy.gov

Updated 6-15-2023

## REQUEST FOR POLICE INCIDENT REPORT

### PLEASE READ:

- **Allow up to seven (7) days after submission for the report or an update on the status.**
- The decision to disclose or refrain from disclosing investigative reports in question is a matter of Jackson Police Department discretion.
- Records not yet adjudicated should be requested directly from the city or county attorney's office.
- Jackson Police Department records will be released according to Wyoming State Statutes.
- Insurance / Legal Agencies may request records via email or fax on company stationery.
- Provide a color copy of your photo ID with your request.
- Email this completed request form to: [JPDIC@jacksonwy.gov](mailto:JPDIC@jacksonwy.gov)

### INFORMATION ON PERSON MAKING REQUEST

PLEASE PRINT CLEARLY

NAME OF REQUESTING PARTY: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY ST ZIP

TELEPHONE: (c) \_\_\_\_\_ (w) \_\_\_\_\_

COLOR COPY OF DRIVER LICENSE OR GOVERNMENT. STATE AND NUMBER: \_\_\_\_\_

### DESCRIBE THE RECORD YOU ARE SEEKING

INCIDENT DATE (OR RANGE): \_\_\_\_\_ OR REPORT NUMBER: \_\_\_\_\_ - \_\_\_\_\_

WHERE DID INCIDENT HAPPEN (ADDRESS): \_\_\_\_\_

TYPE OF INCIDENT: \_\_\_\_\_ REASON FOR REQUEST: \_\_\_\_\_

FULL NAME OF PERSON INVOLVED: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

RELATION TO PERSON REQUESTING RECORD:  SELF  SPOUSE  CLIENT  OTHER: \_\_\_\_\_

IF A MINOR, \* THE SIGNATURE OF MINOR (UNDER 18) IS REQUIRED FOR ANY POTENTIAL RELEASE

ADDITIONAL INFORMATION PROVIDED WITH REQUEST:

INDICATE HOW YOU WISH TO RECEIVE THIS RECORD:  EMAIL  PICK UP  MAIL

continued on back >>>

**FEES MAY BE INCURRED:**

You may be charged a fee to fulfill this request. If so, you will be contacted before the record is released for payment. Fees are set by Town Council Resolution #23-09 adopted June 5, 2023.

\$15.00 POLICE REPORT (requiring redaction)

\$15.00 VIDEO / ELECTRONIC MEDIA

\$16.00 per hour for RESEARCH / COMPILATION (outside work plan)

**SIGNATURE REQUIRED:**

I understand I may be charged a fee depending on the nature of the report and such fee will be paid before records are released.

I have read the information at the top of page 1 concerning what records will not be released. I understand the Jackson Police Department will make reasonable efforts to comply with the Wyoming Public Records Act. I hereby request the previously described Jackson Police Department record(s).

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

**\* SIGNATURE FOR RECORDS INVOLVING MINORS:**

The person alleged to be involved in the requested report is under eighteen (18) years of age and, in conjunction with one (1) of their parents, authorizes the release of any report that may exist. (WS §14-6-203)

(Minor) SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

(Parent) SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**HOW TO SUBMIT:**

1) Download or save this PDF to your device.

Open the PDF from your device and click on the \_\_\_\_\_ button to send by email.

2) Or, print the form and return the completed form to:

- Jackson Police Department Front Desk
- Email to [jpdic@jacksonwy.gov](mailto:jpdic@jacksonwy.gov)
- Fax to 307-733-3241

*Western Heritage*

*“We enhance the quality of life and provide for the safety and security of residents & visitors through professional police services”*

*Community Pride*