



Latah County Sheriff's Office Public Records Request



Business (208) 882-2216
Fax(208) 883-2281

Name of Requesting Person: _____

Address: _____

City/State/Zip Code: _____

Daytime Telephone Number: _____ FAX: _____

I hereby request, pursuant to Idaho Code § 9-388 to: examine copy the following public record:

Motor Vehicle Accident Report DR# _____

Police Report DR# _____

Other: Describe fully so that we can locate the record more quickly. Use dates of arrest or report, location, suspect's name or date of birth, or crime, etc., to help describe what you are requesting:

Records released pursuant to this request are not warranted as to completeness or accuracy. The information provided represents the disclosable information available pursuant to Idaho Code Title 9, Chapter 3. To the extent allowed by law, personal identifying information has been removed pursuant to Idaho Code § 9-340B(1), § 9-335(1)(c) and/or § 9-335(2), because production of this information would constitute an unwarranted invasion of personal privacy.

We will respond to this request pursuant to applicable law but usually within three (3) business days. Business days are Monday through Friday, 8:00 a.m. to 5:00 p.m., excluding holidays. All request received after normal business hours (excluding holidays) shall be deemed received the next business day.

Signature: _____ **Date:** _____

I acknowledge by my signature that the records sought by this request will not be used for a mailing list or telephone list as set forth in Idaho Code § 9-348.

RESPONSE TO REQUEST TO EXAMINE AND/OR COPY PUBLIC RECORDS:

Received by LCSO - Date: _____ Time: _____ Officer: _____

Reviewed by Latah County Prosecutor? NO YES Date: _____

- REQUEST: Approved Partially approved (explanation attached)
 Approved pending payment of fees pursuant to I.C. 9-338 in the amount of \$ _____
 Denied – Idaho Code: _____ (explanation of denial attached)
 Denied because of active prosecution – make request through discovery
 Additional time needed to process request. You will be contacted within 10 working days.

Date Mailed/Released: _____

You have the right to appeal the denial of your request by petitioning the Second Judicial District Court of Idaho within 180 calendar days of this response pursuant to Idaho Code Title 9, Chapter 3.

Wayne Rausch, Sheriff

By: _____, Deputy