

# Colorado Springs Police Department

## Police Report Request (Non-Traffic)

**PLEASE PRINT CLEARLY TO AVOID ANY DELAYS IN PROCESSING YOUR REQUEST**

Police reports maintained by the Colorado Springs Police Department are documents written by Colorado Springs Police Department personnel that describe incidents that are not traffic related. All Colorado Springs Police Department records are released in accordance with current Colorado Revised Statutes. Not all information is releasable on all reports. Therefore, the copy of the report you receive may have areas which have been redacted (blacked out).

Reports involving the following are retained permanently by our department:

- Death of any kind
- Missing Persons/Runaways
- Incest
- Sexual Assault 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Degree
- Indecent Exposure
- Sexual Assault/Exploitation of a Child
- Forgery
- Kidnapping
- Treason
- Theft of a Gun

Prior to releasing certain case reports, Records Section personnel are required to contact the investigating officer in charge of the case. In the event the detective denies the release of the report, you will receive notification of our inability to release the report at that time.

### COST

The minimum fee is **\$6.00**. If the report is more than five (5) pages in length you may be charged an additional **\$0.25** per page. If there are additional fees you will be contacted by a CSPD Record Release Unit representative. For any questions concerning costs please consult the published Schedule of Fees available at [www.springsgov.com](http://www.springsgov.com) or contact the Records & ID Section at 719-444-7521. We accept money orders or personal checks. Please do not enclose cash. "Make checks payable to the City of Colorado Springs"

### REQUEST INFORMATION

Primary Search Information		Alternate Search Information		
Police Report Number		Date of Incident		
Victim's Name		Time of Incident		
Date of Request		Location of Incident		
Time of Request		Name of Victim	DOB	
<b>IMPORTANT - PLEASE READ</b> If you do not know the report number or it is unknown, please provide as much information of the Alternate Search information as possible. This will aid the Records Release Personnel in locating your requested information.		Name of Suspect	DOB	
		Involved Officer(s)		

### MAILING INFORMATION

Please Mail Completed Form & Fee To:	Address You Want the Report Mailed To:		
Colorado Springs Police Department Attn: Records Release Unit – Records & ID Section 705 South Nevada Avenue Colorado Springs, CO 80903	Name		
	Address		
	City, State, Zip		
	Phone		
	Email		
<input type="checkbox"/> Check Here If You Would Like Your Request E-mailed To You.			

### AFFIRMATION & CERTIFICATION

#### In The Area Above - Please Include Any Other Details You Believe May Help Locate Your Report

I hereby certify by affixing my legal signature to this form that any records I obtain as part of this request are for my personal use only and are used only to help me adequately protect myself and/or my family. I further affirm that I will not use any information obtained from this request to inflict retribution, harass, endanger, intimidate, threaten, or otherwise further punish those persons listed in the report under penalty of law.

I hereby verify by affixing my legal signature to this form that any record(s) I obtain will not be used for direct solicitation of any business for pecuniary (financial) gain pursuant Colorado Revised Statute 24-72-305.5

Signature	Printed Name	Date