



RECORDS REQUEST FORM



DATE OF REQUEST: _____

REQUESTING PERSON: _____

BUSINESS NAME OR N/A: _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____ CONTACT PHONE #: _____

= **REQUIRED INFORMATION:**

INCIDENT DATE: _____ **TIME:** _____

NATURE OF CALL (Veh Crash, Domestic, Theft, Fire, Heart Attack, etc.): _____

OTHER IDENTIFYING INFORMATION: _____

FIRE DEPT INCIDENT NUMBER (if known and applicable): _____

RECORDS REQUESTED (PLEASE CHECK):

- 911 CALL F.D. Radio Traffic** Call Notes
- Other (Explain): _____

**If requesting Radio Traffic, how much is needed? _____

- CALL FOR PICKUP WHEN READY** **MAIL WHEN READY**

***** PLEASE REVIEW THE FOLLOWING INFORMATION *****

1. **In accordance with Florida State Statutes, Sections 365.171(15) and 401.30, the name, address, phone number(s), any remarks that could identify the 911 caller(s) AND medical treatment information will be stricken from both the audio records and the printouts of the Dispatch computer notes, unless the requesting party is a Public Safety authority. Certain records may be prohibited from release if they would identify the 911 caller.**
2. Requests that require extensive research (i.e., research requiring more than one hour, data older than 2 years, multiple locations and/or dates, statistics) will require special charges. Contact the administrative office to receive a price quote.
3. "SAME-DAY" requests require prior notification, presence of the requesting party on-site, and approval by the Records Specialist or 911 Communications Center Supervisor before recording will be made.
4. Due to the high volume of requests, all requests for "911 Calls Only" (with or without notes) will be processed first. We attempt to have all requests processed within 10 business days. Requests for radio traffic could result in a longer processing time.
5. If you need a recording of the conversation between the **Police Calltaker** and the 9-1-1 caller, you will need to contact that respective police agency. Our records only contain conversations with the initial 9-1-1 Operator.
6. Recordings will be provided on compact disc (CD) which can be played on any CD player or computer.

>> Mail, bring or fax form to: **PINELLAS COUNTY COURTHOUSE ANNEX, SUITE 140**
PUBLIC SAFETY SERVICES DEPARTMENT, 911 SYSTEMS DIVISION
400 SOUTH FORT HARRISON AVENUE
CLEARWATER, FL 33756
PHONE #: (727) 464-3841
FAX #: (727) 464-3265