



BRISTOL POLICE DEPARTMENT

131 North Main Street
Bristol, CT. 06010

Freedom of Information Act Report Request

Please Print

Attn: _____ Request Date: _____

Under the Freedom of Information Act, I hereby request the report for the following incident:

Case _____ Incident occurrence date: _____

Person(s) involved: _____

Incident Location: _____

Requestor's Name (Optional) _____

Requestor's Signature (Optional) _____

Requestor's Phone # _____

*Reports can only be released in accordance with State of Connecticut Freedom of Information Statutes (FOI). I understand the Bristol Police Department has four (4) days to determine if the requested report can be released in compliance with FOI laws. Reports may be released as redacted reports or as complete reports. The requester will be contacted at the listed phone number. **The requester will be required to pay for the report at the time of pick up.***

Office Use only:

Received by employee #: _____

Approved: Denied:

Reason for Denial: _____

Authorized Signature: _____

Notification: _____