

Data Request Form
Beltrami County Sheriff's Office

A. Completed by Requestor (Please Print)

Providing this data is optional for a request for public data. If your request is for private data you will also be required to produce proof of your legal right to it, such as providing photographic identification before being given private data about yourself.

Name (Last, First, MI): _____

Street Address: _____

City, State, ZIP: _____

Contact Phone #: _____

Email: _____

Signature: _____ Date: _____

****MANDATORY****Description of the information requested: (Include case number if available, complete addresses, names, and dates whenever possible. Attach additional sheets if necessary.)

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B: Completed by Records Personnel

Handled by: _____

****Reason referred to County attorney****

___ Pending Charges ___ Charges filed ___ Juvenile charges ___ Victim sexual or domestic assault
___ Potential juvenile delinquent—charges? Y N ___ Other _____

Fees:

___ None ___ Yes, _____ Pages x \$.25 = _____ or _____ (Special Rate)

Identity Verified for Private Information:

___ DL or other ID ___ Personal Knowledge ___ Other form of verification explain: _____

C: Completed by County or City Attorney's Office

Information Classified as:

___ Public ___ Non Public ___ Private Protected ___ Confidential

Action:

___ Approved ___ Approved in part (Explain below) ___ Denied (Explain Below)

Remarks or basis for denial (include Statute):

