

MONTROSE POLICE DEPARTMENT

434 S 1st
Montrose, CO 81401



OPEN CRIMINAL JUSTICE RECORDS

(970)252-5200
Mon – Thurs, 7am-6pm

Submit In Person or Email to pd-records@cityofmontrose.org or Mail To Address Above

- **Background Checks Are \$10**
- **Basic Reports Are \$10 – Additional Charges May Be Added For Research and Retrieval**
- **Sign And Complete Report Request Form with Copy Of Photo ID**
- **For Email Complete Card Authorization Form**

Report Request Will Only Be Processed Once All Items Are Submitted

Today's Date:

Your Name **[Required]** _____ Date of Birth **[Required]** _____
 Parent/Guardian Of Involved Individual? Name and Birthdate _____
 Email: _____ Telephone number(s): _____

Case Number(s):

If Case Number(s) Are Unknown, Fill Out Available Information Below

Date(s) & Time(s): _____
 Location: _____
 Type of Incident(s) e.g. Accident _____
 Involved Individual(s): _____

(Background Checks Only) Name/Aliases:	Date of Birth:

24-72-305.5 Access To Records – Denial By Custodian – Use Of Records To Obtain Information For Solicitation. Records Of Official Actions And Criminal Justice Records And Names, Addresses, Telephone Numbers, And Other Information In Such Records Shall Not Be Used By Any Person For The Purpose Of Soliciting Business For Pecuniary Gain. The Official Custodian Shall Deny Any Person Access To Records Of Official Actions And Criminal Justice Records Unless Such Person Signs A Statement Which Affirms That Such Records Shall Not Be Used For The Direct Solicitation Of Business For Pecuniary Gain.

24-72-309 Violation – Penalty. Any Person Who Willfully And Knowingly Violates The Provisions Of This Part 3 Is Guilty Of A Misdemeanor And, Upon Conviction Thereof, Shall Be Punished By Fine Of Not More Than One Hundred Dollars, Or By Imprisonment In The County Jail For Not More Than Ninety Days, Or Both Such Fine And Imprisonment.

Signature

By signing this form I acknowledge that I have read and understand the Colorado Revised State Statute above

NOTE: OFFICIAL CUSTODIAN MAY DENY ACCESS TO RECORDS FOR ANY LAWFUL REASON.

FOR DEPARTMENTAL USE ONLY

RECEIVED BY _____ TIME/DATE _____
 ID VERIFIED BY _____
 PREPARED BY _____ CONTENTS TO DS: _____ TOTAL DUE: _____
 R/P CONTACTED TIME _____ DATE _____
 RELEASE METHOD: _____ IN PERSON _____ MAIL _____ FAX _____ EMAIL _____
 RELEASED BY: _____ DATE: _____