

Freedom of Information Act Request - City of Oregon Police Department

FOIA Officer – Chief Darin DeHaan

Oregon Police Department

115 N. 3rd St., Oregon, IL 61061

Fax: (815) 732-7303 or Email: oregonpd@comcast.net

The Freedom of Information Act is an act in relation to access of public records and documents. Other State or Federal laws such as the Privacy and Security Act or the Juvenile Court Act, may take precedence over the Freedom of Information Act, and may prevent your access to all or part of the information you have requested. **CRIMINAL HISTORY INFORMATION IS EXEMPT FROM THE ILLINOIS FREEDOM OF INFORMATION ACT.**

The Act allows us **five (5) business days, excluding weekends and holidays** to comply with your request. You will be notified by mail as to whether your request was approved or denied. If denied the reason for denial will be included in your letter. If approved, your letter will indicate when and where your copy will be made available. The first fifty (50) pages are free for black and white copies. There is a .10 cent fee for each additional copied page of information. Any fee is payable upon receipt of documents.

To assist a search pertaining to your request and help us determine your right to access, please complete the information requested below.

Your Name (please print) _____ Address _____

City / State / Zip _____ Telephone Number _____ E-mail address _____

INFORMATION REQUESTED

POLICE INCIDENT REPORT NUMBER (if known): _____

Incident Type: _____ Incident Date: _____
(e.g.: burglary, assault, battery)

Incident Location: _____

PERSON(S) INVOLVED IN INCIDENT: If applicable, include your name

Name: _____ D.O.B.: _____ Sex: M F

Address: _____

Name: _____ D.O.B.: _____ Sex: M F

Address: _____

OTHER INFORMATION: _____

I wish to **inspect** the requested records; or

I wish to **receive** the requested records via:

In Person; US Postal Service; Fax _____; E-mail _____

Records requested at:

_____ on the _____ day of _____, _____
Time Date Month Year

Signature of individual making request: _____

OFFICE USE ONLY

- The records so requested have been reviewed and are appropriate for release under the guidelines of the Illinois Freedom of Information Act.

- Reason access was denied to above-listed records (list names and titles of all persons authorizing denial and specify exact section of the Illinois FOIA which applies):

Signature and Title of Freedom of Information Officer reviewing records:

_____ Date _____

The records so requested were provided to or presented to such individual at:

_____ on the _____ day of _____, _____
Time Date Month Year

Via: In Person; US Postal Service; Faxed; E-mailed; or Presented for inspection.

Signature and Title of employee presenting/providing records for inspection:

_____ Fee Collected _____