

Guidelines for Requesting Information: Police or Fire Reports and Data Summaries **Lino Lakes Public Safety Department Reports and Data Summaries**

To obtain a copy of a Lino Lakes Public Safety Department report, fill out the attached *Request for Information: Police Reports and Data Summaries* form. Requests may be submitted by mail, fax or in person to the Lino Lakes Public Safety Department during normal business hours (Monday - Friday, 8:00 a.m. to 4:30 p.m.). Requests will be processed in the order received.

To request police or fire reports, you will need to supply pertinent information such as case number, type of incident, location and date of incident, name of individual(s) involved in the incident.

Data summary reports on calls for service to specific addresses, areas, or a summary of data pertaining to a particular offense can be obtained by providing the nature and detail of data desired, date(s) or range(s) of dates to be searched and specific locations.

Turnaround time is 10 business days. You will be notified when your request is complete. You may choose to pick up the report in person or we will mail the report to you. In certain situations, we may be able to email the report.

State laws dictate the disbursement of law enforcement data. Per state statute, government information is classified as Public, Private, Nonpublic or Confidential. If the report you request is not considered public data per statute, you may not be able to obtain a copy of the report. If this is the case, you will be notified by the Department.

Please be advised police reports concerning juveniles, domestics, sexual assaults, vulnerable adults and open criminal investigations are not considered public data by Minnesota statute and the department is required to withhold these reports as directed by Minnesota law.

Cost: Inspection of reports is free but the cost for a copy is \$4 for up to four pages, then 25 cents per page thereafter. Reports are free to the subject of the data up to three pages, fourth page will be \$1 and 25 cents per page thereafter. Data requested on DVD/Disc cost \$25 per disc. The actual cost of certain data requests may be higher depending on employee time, the cost of the materials onto which we are copying the data and mailing costs (if any).

Accident Reports

There are two types of reports regarding an accident. A citizen's report is the [Minnesota state motor vehicle crash report](#) form filled out by the individual(s) involved in the accident. Every driver involved in a crash resulting in \$1000 or more in property damage, injury or death must complete the form which may be obtained [online](#) through the Minnesota Department of Public Safety or picked up at the police department. Once filled out, the individual must submit the form to MN Driver & Vehicle Services (DVS). [Requests for this report](#) can be made through [DVS](#). For questions, call MN DVS at 651-797-1244.

A police report is completed by the officer present at the accident scene. A copy of this type of report can be obtained at the Lino Lakes Public Safety Department no less than seven days after the accident. A case number is required.

Attorneys/Insurance Companies Requests for Police Reports

Attorneys or insurance companies requesting copies of police/accident reports are required to do so in writing on their agency letterhead and to provide a signed release from their client(s) with the report/accident report request.

Reports will only be distributed to attorneys and insurance companies providing a stamped, self-addressed envelope with the request. Requests can be mailed to the address below. Cost is \$4 per report.

Lino Lakes Public Safety Department Records Unit
640 Town Center Parkway, Lino Lakes, MN 55014
Phone: 651-982-2300 Fax: 651-982-2399



REQUEST FOR INFORMATION: POLICE OR FIRE REPORTS, CALLS FOR SERVICE AND OTHER DATA



Lino Lakes Public Safety Department-Records Unit
640 Town Center Parkway, Lino Lakes, MN 55014
Phone: 651-982-2300 Fax: 651-982-2399

Requests may be submitted by mail, fax or in person to the Lino Lakes Public Safety Department during normal business hours
(Monday - Friday, 8:00 a.m. to 4:30 p.m.). Turnaround time is 10 business days.

REQUESTED BY

Name _____		Date of Request _____
Address _____	Phone _____	Email _____

Requestor is the: Auto Accident Victim Crime Victim (Other than auto accident) Property Manager

Suspect/Arrestee Complainant Attorney/Insurance Company Other _____

Are you named in the data requested? Yes No
If not, you may need a signed release from the data subject. Without a signed release, you may not be entitled to the data requested.

TYPE OF INFORMATION REQUESTED

The information you are requesting may or may not be available to you. After your request is reviewed, you will be notified when the information is available and if any fees will be assessed.

<input type="checkbox"/> <u>Police or Fire Report</u> Type of Incident _____ ICR/Case Number _____ Date/Time of Incident _____ Location of Incident _____	<input type="checkbox"/> <u>Other Data Request</u> Detail of Data Desired _____ _____ _____ Time Period (From _____ to _____) Location(s) _____ _____ Purpose _____ _____
<input type="checkbox"/> <u>Police Calls for Service to a Location</u> Full Address _____ _____ Time Period (From _____ to _____)	

<input type="checkbox"/> <u>Police Contact with a Person</u> Name _____ _____ Time Period (From _____ to _____)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="background-color: black; color: white; padding: 2px;">TO BE COMPLETED BY DEPARTMENT STAFF</th> </tr> <tr> <td style="padding: 5px;">Report Cost \$ _____</td> <td style="padding: 5px;"><input type="checkbox"/> Requested Data Released</td> </tr> <tr> <td style="padding: 5px;">Date _____</td> <td style="padding: 5px;"><input type="checkbox"/> Record Inspected Only</td> </tr> <tr> <td style="padding: 5px;">Released By _____</td> <td style="padding: 5px;"><input type="checkbox"/> Request Denied</td> </tr> <tr> <td></td> <td style="padding: 5px;"><input type="checkbox"/> Redacted Copy</td> </tr> <tr> <td></td> <td style="padding: 5px;"><input type="checkbox"/> No record</td> </tr> </table>	TO BE COMPLETED BY DEPARTMENT STAFF		Report Cost \$ _____	<input type="checkbox"/> Requested Data Released	Date _____	<input type="checkbox"/> Record Inspected Only	Released By _____	<input type="checkbox"/> Request Denied		<input type="checkbox"/> Redacted Copy		<input type="checkbox"/> No record
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If the requested data is private or confidential, you will be asked to present a photo ID to ensure you are entitled to the data.
 ID verified by (employee name) _____