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## **Open Records Request Form**

Important Notice: This form must be completed and included with all requests under the Colorado Open Records Act, including any requests for Fire or Investigation Reports. All requests are subject to HIPAA regulations or other applicable laws, and may be redacted or withheld in accordance with those laws. Fees may be applied pursuant to the District's Open Record Response Request Policy, available on the District's Website. **Applicant Business Name: Application Date:** (if Applicable) **Applicant's Name: Applicant's** Address: City: State: Zip Code: **Email: Telephone:** Please complete this section for any Fire Report/Investigation Requests Case Report # **Date of Incident:** if known: Address of Incident: Zip Code: City: State: **Reason for Request: Comments:** □ Email □ US Mail □ Pick Up or □ Inspect in Person On-site **Preferred Method** □ FedEx (Additional Fee) □ UPS (Additional Fee) of Delivery **Requested Information and Documents:** To expedite the request, be as specific as possible in describing the records being requested.

| Fire Department Use Only |                      |  |
|--------------------------|----------------------|--|
| Date Received:           | Received by:         |  |
| Request processed by:    | Request returned by: |  |
| Extension Needed:        | Date returned:       |  |