

FREEDOM OF INFORMATION ACT (FOIA)
REQUEST FOR PUBLIC SAFETY RECORDS
Section 2.2-3700, Code of Virginia

DATE OF REQUEST M/D/Y _____

1. Individual Requesting Information:

- a. Full Name: _____
- b. Company (If applicable): _____
- c. Address: _____
- d. City: _____ State _____ ZIP _____
- e. Telephone: (Home) _____ - _____ - _____ (Cell) _____ - _____ - _____
- f. Email Address _____

2. Records Requested (Check the appropriate box(s) and provide as much detail as available)

- ☐ 911 Event Printouts -Available for 3 years
- ☐ 911 /Telephone Tape -Available for 1 year/ Transcripts are not available
- ☐ Dispatch Tape - Available for 1 year/ Transcripts are not available
- ☐ Fire/EMS Reports -Available for 5 years
- ☐ Police Reports -Availability varies based on report, minimum 3 years

3. Date of Occurrence: _____ Time: _____

4. Full address of occurrence: _____, Norfolk, VA ZIP _____

5. Name (s), Date of Birth, and last 4 of SSN or person involved

_____, _____
_____, _____

6. Detailed description of Request _____

7. Pursuant to Virginia Code 2.2-3704(F), it will be necessary for you to reimburse the City of Norfolk for all costs incurred in the productions of these records.

Signature of Requestor: _____

You can mail the completed form back to:
City of Norfolk Communications Division
810 Union Street, Ste. 409
Norfolk, VA 23510

You can also fax it to (757) 664-4006 or email it to FOIARequest@norfolk.gov
Requests can also be submitted online at: <http://www.norfolk.gov/requesttracker.aspx>
Call (757) 664-4266 with any questions