State and Federal law restricts the disclosure of certain information held or under the control of law enforcement agencies. The Bloomfield Police Department is only authorized to disclose this information if this form is fully completed, signed, and returned to the Bloomfield Police Department. Incomplete forms may result in denial of your request. If a request is denied in whole or in part, the requester will be notified. This record request shall become a public record and may be subject to disclosure to other requesters.

Note: statutory and administrative fees may apply to this request. Bloomfield Police Department may in its discretion require full or partial prepayment of copying and related fees before fulfilling a record request.

Make checks payable to:
BLOOMFIELD POLICE DEPARTMENT
N1100 Townhall Road
PO Box 47
Pell Lake, WI 53157
(262) 279-3454

**REQUESTER INFORMATION**

Full Name: ________________________________

Mailing Address: ____________________________________________________________

City: __________ State: ___ Zip Code: ________

License/ID #: ____________________________

SSN or ITIN (if no license/ID #): __________________________

Telephone #: (___) ___ - ______

**Information Requested** (be as specific as possible. Vague, overbroad, illegible, ambiguous or otherwise erroneous requests will be denied or delayed):

________________________________________

________________________________________

________________________________________

Requester must indicate by checking the appropriate box below the purpose for the request. Some information may still be redacted based upon Wisconsin law.

**Personal Information** includes: 1. **driver identification number**; 2. **name**; 3. **address** (but not the 5-digit zip); and 4. **telephone number**. Personal information will be redacted from any request unless the requester certifies that the request is made for any reason indicated in Section I or Section II of this form.

**SECTION I**

☐ For use in connection with matters of motor vehicle or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research; and removal of non-owner records from the original owner records of motor vehicle manufacturers.

☐ For use in the normal course of business by a legitimate business or its agents, employees, or contractors, but only --
  a. to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors; and
  b. if such information as so submitted is not correct or is no longer correct, to obtain the correct information, but only for the purposes of preventing fraud by, pursuing legal remedies against, or recovering on a debt or security interest against, the individual.

(SECTION I CONTINUED)
Highly Restricted Personal Information includes: 1. photograph or image; 2. Social Security number; and 3. medical or disability information. Highly restricted personal information will be redacted from any request unless the requester certifies that the request is made for any reason indicated in Section II of this form.

**SECTION II**

- For use if the requester demonstrates that they have obtained written consent from the person about whom the information pertains. Please indicate which applies:
  - □ (a) I am requesting a copy of my own record.
  - □ (b) I am a parent or legal guardian of a minor child and am requesting a copy of his/her record.
  - □ (c) I am requesting the record of another person and have attached their written consent.

- For use by any government agency, including any court or law enforcement agency, in carrying out its functions, or any private person or entity acting on behalf of a Federal, State, or local agency in carrying out its functions.

- For use in connection with any civil, criminal, administrative, or arbitral proceeding in any Federal, State, or local court or agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a Federal, State, or local court.

- For use by any insurer or insurance support organization, or by a self-insured entity, or its agents, employees, or contractors, in connection with claims investigation activities, anti-fraud activities, rating or underwriting.

- For use by an employer or its agents or insurer to obtain or verify information relating to a holder of a commercial driver's license that is required under the Commercial Motor Vehicle Safety Act of 1986 (49 U.S.C. App. 2710 et seq.).

I certify that I am the requester and am qualified to receive this information for the reason(s) I have indicated in either Section I or Section II of this form. I understand that the willful, unauthorized disclosure of information obtained from these records for a purpose other than stated on this request, or the sale or other distribution of the information to a person or organization not disclosed in this request may result in penalties imposed under Title 18 U.S.C. Section 2724.

Signature: ____________________________ Date: __/__/____

Bloomfield Police Department cannot give legal advice regarding how to draft a request.