



# KARNES CITY POLICE

## Request for Public Information (Pursuant to Open Records Act, Article 6252-17a)

Karnes City Police Department accepts Open Records Requests in any written format. This form is intended to be a guide to help expedite requests. This form may also be used to request a copy of an Accident Report. Please e-mail your request to [kcpd@cityofkctx.com](mailto:kcpd@cityofkctx.com); or fax your request to 830-780-2391; or mail the completed form to: Karnes City Police Department, Attn: Chief Roel Salas, 211 E. Calvert, Karnes City, TX 78118.

\*Name (please print): \_\_\_\_\_

Company/Organization: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

\*Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**Do you want a copy of the document?**

Yes (fees apply)

Yes Certified Document? (fees apply)

**Type of document/report?**

Accident Report (\$6.00 per report)

Other (0.10 / page for first 50 pages)

In making this request, I understand that the PD is under no obligation to create a document to satisfy my request or to comply with a standing/ongoing request for information. I further understand that copies of the information will be released only in accordance with the Act, and the PD reserves its right to seek a ruling either from the County Attorney, DA or the Texas Attorney General with regard to the release of said information. If a ruling is sought by the PD, you will be notified.

\*Please provide the type of information or name(s) of the document, including inclusive dates, if know, regarding the document you seek:

\*Name of document: \_\_\_\_\_

\*Date and time incident or inclusive dates of document: \_\_\_\_\_

\*Address or location of incident: \_\_\_\_\_

\*Name(s) of party(s) involved: \_\_\_\_\_

Incident number, if known: \_\_\_\_\_

**NOTE: Police reports are usually not available until 5 – 10 business days after the accident/incident occurred.**

**“\*” indicates required information**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Office use only:

Notified request is ready on: \_\_\_\_\_

Date of Completion: \_\_\_\_\_