

Open Records Request

Date: _____

To: Austin County Sheriff's Office, Records

Pursuant to the Texas Open Records Act, I am requesting the following information:

Please provide a copy of a report for an incident/accident that occurred on
_____ at the address _____ in
_____, TX.

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Signature: _____

Information Provided (Austin County Sheriff's Office use only)

Incident / Report #: _____

Description of Forms / Items Released: _____

___ Accident Report ___ \$10 Charge for Accident Report

___ Incident Report ___ \$ 0 Charge

Provided By: _____ Date: _____

Via e-mail fax in person mail