



## FEE SCHEDULE

All criminal justice records are released in accordance with Colorado Revised Statutes, Open Records Act, Criminal Justice Records Act, Fees Authorized, 24-72-205(5)(a), C.R.S., section 24-72-306, C.R.S., and other applicable law. Records may be denied for release due to confidentiality of information or other statute mandates.

All minimum initial fees are to be paid as a deposit before the requested service is started. Initial fees (deposits) are not refunded if the release of the requested record is denied.

<b>Research, Retrieval, Compilation &amp; Non-Video Redaction</b>	<b>\$33.58/hour (first hour waived)</b>
<b>Reports</b>	<b>\$7.50 (up to 10 pages) \$0.25 per additional page</b>
<b>Video, Audio, Photocopies (1 CD or DVD included)</b>	<b>\$25.00 per CD plus \$33.58 for each hour of review / copying / handling</b>
<b>Sex Offender Registration</b>	<b>\$75 new, \$25 annual or quarterly</b>
<b>VIN Checks</b>	<b>\$20.00 (waived for residents)</b>
<b>Warrant Surcharge, each</b>	<b>\$50.00</b>
<b>Certified Copies</b>	<b>\$1.00 per page</b>
<b>Video Redaction Fee (Body Worn Camera, Etc)</b>	<b>Up to 2 hours of total video = \$100 to \$168 per hour of video (actual cost) Greater than 2 hours of total video = \$350 to \$550 per hour of video, depending on complexity (actual cost)</b>
<b>Additional Cost for Media (CD, DVD, USB Drive)</b>	<b>Costs vary depending on storage required. (actual cost)</b>
<b>Special Events Fees</b>	
<b>Officer</b>	<b>\$90 per hour</b>
<b>Supervisor</b>	<b>\$105 per hour</b>
<b>Deposit required when cost is estimated to be \$50.00 or more.</b>	<b>Minimum total of request.</b>



# Mead Police Department



## Video, Audio, and Photo Request Form

### See Fee Schedule

Please be aware that large requests will require additional processing time. If your request requires more than one (1) hour of processing (first hour is free), we will contact you with an estimate of time required to complete your request. Additional time is billed at a rate of \$30 per hour and payment is required in advance. You will be notified when your request is ready for pick up. Items not picked up within fourteen (14) days will be destroyed.

### INSTRUCTIONS: (This form must be completed accurately)

Bring or mail this form to the Mead Police Department, 537 Main St, P.O. Box 31, Mead, Colorado 80542. You may also fax this form to 970-535-0831 or scan and email to police@townofmead.org. The phone number for Mead Police Department is 970-805-4194.

*Your signature affirms that the requested information will not be used for solicitation of business for monetary or pecuniary gain and acknowledges that such a violation is a misdemeanor and is punishable by a fine and/or imprisonment – C.R.S. 24-72-305.5 & 24-72-309.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Body Worn Camera     Audio Recordings     Video     Photo Disk

Person Requesting Items:		Case Number:
Person(s) Authorized to Pick-Up Requested Items (Photo ID Required):		
Type of Incident:	Name of Person Involved:	
Location of Incident:	Date/Time of Incident:	
Phone Numbers (circle daytime #) Cell:	Work:	Other:
Driver's License or I.D. Number of Requestor (Mandatory): STATE:		
<b>CIRCLE ONE:</b> I am: Victim; Arrestee; Suspect; Witness; Guardian for _____; Other _____		
<b>TO BE COMPLETED BY MEAD POLICE DEPARTMENT PERSONNEL ONLY</b>		
<input type="checkbox"/> No Record Found <input type="checkbox"/> More Information Needed <input type="checkbox"/> Released <input type="checkbox"/> Denied <input type="checkbox"/> Destroyed		
Fee Due: _____ Date Request Received: _____ Date Provided/Destroyed: _____		
Employee Releasing Item: _____ Remarks: _____		
Requesting Party Notified By: _____ Date: _____ Time: _____		