

Open Records Request Form

By submission of this document, I am requesting the information stated below. I have given the specifics of the information I am requesting. I understand that some document or portions thereof, are subject to non-disclosure under Chapter 552 of the Texas Government Code, Public Information Act and other state and federal laws.

I understand that Texas license plate numbers, driver's license numbers, vehicle identification numbers and social security numbers are confidential by law and cannot be released to me. I further understand that personal financial identification numbers including but not limited to credit card account numbers, bank account numbers, etc. are confidential. I hereby stipulate that my request excludes these items and authorize them to be redacted (removed) from the document(s) I am requesting.

If the information cannot be produced within 10 business days the Public Information Officer will notify you in writing of the reasonable date and time when it will be available.

If UNT Dallas requests a ruling from the Office of the Attorney General regarding any information UNT Dallas wishes to withhold, your request will be referred within 10 business days. The Office of the Attorney General must issue a decision no later than the 45th business day from the day after the attorney general received the request for a decision.

Please describe the records you are requesting. If possible, please include report number (incident/arrest/ accident, etc.), names with dates of birth, location, date of occurrence or time periods, and type of document requested.

YES

NO

(Check one)

Type Of Report Request (Offense, Incident, Arrest, etc.): Person's Name On The Report: Report # (Example: 2011xxxx): Date of occurrence: Report Details - Specify Exactly What Information Is Needed (be specific with Names, Dates, Locations, etc.) Requestor's Information Name: Address: City / State / Zip: Daytime Phone: Email: For Police Use Only Date Received: Received By: Released By: _____ Date Released:

Open Records request must be made in writing. They may be submitted by: Fax: 972-338-1992 Email: Chief@UNTDallas.edu

Mail or hand-carried: 7400 University Hills Blvd, Dallas, TX, 75241

Date Forwarded to: UNT System Attorney _______ A.G. _____ Released/denied: ___