



## Oconee County Sheriff's Office

### Open Records Request Worksheet

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Requestor Name: \_\_\_\_\_

Requestor Phone Number: \_\_\_\_\_

Requestor Address: \_\_\_\_\_

Requestor Email Address: \_\_\_\_\_

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Types of Records Requested:

Incident Report

Jail Record

Accident Report

Body/Dash Cam Video

CAD Report

9-1-1 Audio

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Name of Individual (victim/suspect): \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Case Number (if available): \_\_\_\_\_

Other Information:

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Date & Time of Request: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Notice:

Some public records are exempted from disclosure by law. You will be notified within three(3) business days if the record sought is a public record available for inspection, and you will be notified when the record will be available for inspection and/or copying. You may be charged \$.10 for each page of our records you request to have copied, and may be charged an additional fee for certified copies or for other copies for which a fee is specifically authorized or otherwise provided by law. In addition, you may also be charged a reasonable fee for search, retrieval, and other direct administrative costs if your request necessitates an unusual administrative cost or burden.