

Requestor's Information

UNIVERSITY OF ST. THOMAS POLICE DEPARTMENT



3807 Graustark St • Houston, TX 77006 • Phone: (713) 525-3888 • Fax: (713) 942-5966

Texas Public Information Act Request Form

Please note that Texas Public Information Act requests which seek information other than an officer's accident report (as described in option two below) are handled by the University of St. Thomas Office of the General Counsel ("University of St. Thomas OGC"). Consequently, unless you request only basic information or an officer's accident report, this form will be forwarded to the University of St. Thomas OGC for that office to determine, in accordance with applicable Texas law, what, if any, of the information requested below will be released. If you are seeking more than basic information or an officer's accident report, an attorney from the University of St. Thomas OGC will be in contact with you within the time allowed under Texas law.

Full Name:		
Address:		
Phone No.:		
Email Addr	ess:	
Check one:		
		I would like to view the requested information at the University of St Thomas Police Department.
		I would like the information sent to me by: Mail (by photocopy) Mail (on CD) Email Fax:
University of report, accid detail as po who were in	below, perfection of the second secon	please describe in detail the information that you are requesting from the mas Police Department (e.g., please list whether you are requesting an incident ort, information report, or other information, and please provide as much such as the case number, date(s) of occurrence, officer(s) and/or individual(s) location, and any other information that you can provide regarding the are requesting).
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Request Options (check one)

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	Option 1 : Please provide me with only the <u>basic information</u> that is contained in the information that might otherwise be responsive to my request above. The University of Standard Police Department considers such information to include (as applicable): the name and description of the arrested person (excluding the social security number), the data time, and place of the arrest, the offense charged and the court in which it is filed, the detail of the arrest, booking information, the notation of any release or transfer, bonding information, the location of the crime, the premises involved, the time of occurrence of the crime, the property involved, if any, the vehicles involved, if any (excluding the Text driver's license numbers, license plate numbers and vehicle identification numbers), description of the weather, a detailed description of the offense, the complainant, and the names of the arresting and investigating officers.							
	Option 2: Please provide me with only the officer's accident report that was complete pursuant to Chapter 550 of the Transportation Code. I understand that I must provide tw of the following three pieces of information to be entitled to such an accident report pursuant to Texas Transportation Code § 550.065(c)(4): a) Date of the accident: b) Name of any person involved in the accident: c) Specific location of the accident:							
	Option 3: Please provide me with all of the information that is responsive to my request. understand that this will require an attorney from the University of St. Thomas OGC to review the information that is responsive to my request. I also understand that it may be necessary for an attorney from the University of St. Thomas OGC Counsel to request are opinion from the Attorney General of Texas regarding whether the information that is responsive to my request meets an exception to public disclosure, and in such case, may result in some or all of the requested information not being released to me. I further understand that the process of requesting and receiving an opinion from the Attorney General of Texas may take up to 60 business days.							
Signat	ure of Requestor:				Date:			
	Received by:							
	Ву:	□ Mail	□ E-Mail	□ Fax	☐ Hand Delivery			