

OPEN RECORDS REQUEST

City of Mansfield
1200 E. Broad St.
Mansfield, TX 76063
Email: openrecords@mansfieldtexas.gov
Phone: 817-276-4207 Fax: 817-473-2925

Date Received: _____

Due Date: _____

ORR# _____

Forward To: _____

By submission of this document, I am requesting the information stated below. I understand that some records may be subject to non-disclosure under the Texas Public Information Act, Government Code Chapter 552, and other laws. I further understand that there is a fee charged per request to cover the cost of reproduction or copying.

Records must currently exist; no compiling or creating of records will be performed.

IF THIS IS A REQUEST FOR POLICE RECORDS: List the Incident / Report Number (if known), Name of Individuals Involved, Date, Location, and Nature of Incident. Identify your Relation to the Incident. Police Records MUST be picked up in person by the original Requestor.

Please Print Clearly and Specifically the Records you are Requesting.

Please Check Here If You Are Willing To Accept Redacted Records.

NAME:

ADDRESS:

CITY/STATE/ZIP:

PHONE #:

EMAIL:

SIGNATURE OF REQUESTOR: