



Open Records Request

Leander Police Department

705 Leander Dr
Leander, TX 78641
(512) 528-2800, (512) 528-2841 Fax

Official Use Only

☐ Approved ☐ Denied

Date: _____

Employee #: _____

Requestor Information

Name: _____ Date: _____ Due: _____

For official use only

Business/Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ Telephone number: _____

I (we), the above named individual/business, hereby request the following information be provided under authority of the Texas Open Records Act. I (we) understand that a fee(s) will be charged for the service(s) provided and that these charges follow established city policy and state law. Any request for body camera footage must comply with *Code of Criminal Procedure (CCP) 2B.0111*.

Requested Information

Date range: _____ to _____ Incident type: _____

Incident address: _____

☐ *Specific Information Request*

Names of person(s) involved: _____

Incident or call number: _____

☐ *Statistical Information Request*

Describe the information you need: _____

We will attempt to provide you with the information you need using an existing report format. If you request data that is not normally computerized, in a format that will require computer programming to produce, or historical data that requires us to make off site archival searches, you may be required to pay for the actual cost we incur. In the event an additional charge may apply, we will notify you before beginning the job.

Sign only one (1) area – if both areas are signed, the request will be returned to you!

I agree to accept a redacted copy (both mandatory and discretionary redactions) of the requested document/report, and understand a redacted copy will be provided within ten (10) working days from the date of the request

Signature: _____

I do not want a redacted copy of the requested document/report and agree to wait the required 45 to 55 days so the Texas Attorney General Office can issue an opinion on what, if any portions, of the document/report will need to be redacted.

Signature: _____

* Your identity is not required for an information request under the Texas Open Records Act. However, if you are requesting a local criminal history check or other name dependent report or service, your identity may be required in order to fulfill your request.