

**Request Completed****Date:** \_\_\_\_\_**BY:** \_\_\_\_\_**Body Worn Camera/Cruiser Video Request**

Form and deposit are required with each request

**REQUESTER INFORMATION**

Requester Name		Date of Request
Requester Address		
Requester Phone	Requester Email	
If you wish to remain anonymous, you must list a method of contact		

**TYPE OF VIDEO REQUESTED**

Body Worn Camera	Cruiser Dash Cam	Both	Other (explain)
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**INCIDENT DETAILS**

Incident Date and Time	Incident/Report Number(if known)
Person Involved in Incident (Were you a party to the incident? If not, name of person involved.)	
Incident Location (Street address or description of location)	
Nature of Incident (Briefly describe what happened)	

**FEES**

There is a fee associated with the request of \$75.00 / hour per video, with a max amount of \$750.00 per request. **Please submit completed form with your deposit. Make checks payable to the City of Tipp City.**

<u>Video Length</u>	<u>Hours</u>	<u>Cost</u>	<u>Deposit Paid</u>	<u>Amount Due</u>
<b>PAID (    ) Cash (    ) Money Order (    ) Check (    ) #</b>				

**SIGNATURE**

By signing, I agree to the fee(s) associated with this request and understand the fees outlined above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Tipp City Police Department****Gregory T. Adkins, CLEE****Chief of Police**

260 S. Garber Drive • Tipp City, Ohio 45371

(937) 667-3112 • (937) 667-7529 Fax

[www.tippcityohio.gov](http://www.tippcityohio.gov)