

# **Guidelines for Requesting Information: Police Reports and Data Summaries**

## **North Mankato Police Reports and Data Summaries**

To obtain a copy of a North Mankato Police Department report, fill out the attached *Request for Information: Police Reports and Data Summaries* form. Requests may be submitted by mail, fax, email or in person to the North Mankato Police Department during normal business hours (Monday - Friday, 8:00 a.m. to 5:00 p.m., excluding holidays). Requests will be processed in the order received.

The North Mankato Police Department cannot require a requestor to identify themselves or provide a reason for their request. Not providing this information will remove our ability to contact you to clarify the request, notify you the request is complete, notify you of extra costs or delays, provide information on juveniles, provide private data, provide State Accident Reports.

To request police reports, you will need to supply pertinent information such as case number, type of incident, location and date of incident, name of individual(s) involved in the incident.

Data summary reports on calls for service to specific addresses, areas, or a summary of data pertaining to a particular offense can be obtained by providing the nature and detail of data desired, date(s) or range(s) of dates to be searched and specific locations.

Standard response time is 10 business days. You will be notified when your request is complete. You may choose to pick up the report in person or we will mail the report to you. In certain situations, we may be able to email the report.

State laws dictate the disbursement of law enforcement data. Per Minnesota Statute 13.02, government information is classified as Public, Private, Nonpublic or Confidential. If the report you request is not considered public data per statute, you may not be able to obtain a copy of the report. If this is the case, you will be notified by the Department.

Please be advised police reports concerning juveniles, domestics, sexual assaults, vulnerable adults and open criminal investigations are not considered public data by Minnesota statute and the department is required to withhold these reports as directed by Minnesota law.

Cost: Inspection of reports is free; the cost for copies of reports is 25 cents per page. The actual cost of certain data requests may be higher depending on employee time, the cost of the materials onto which we are copying the data (paper, CD, DVD, etc.), and mailing costs (if any).

### **Accident Reports**

A citizen's report is the [Minnesota state motor vehicle crash report](#) form filled out by the individual(s) involved in the accident. Every driver in a crash involving \$1000 or more in property damage, injury or death must complete the form which may be obtained [online](#) through the Department of Public Safety or picked up at the police department. Once filled out, the individual must submit the form to MN Driver & Vehicle Services (DVS). [Requests for this report](#) can be made through [DVS](#). For questions, call 651-797-1244.

A police report is completed by the officer present at the accident scene. Minnesota State traffic accident reports filed with the State of Minnesota require a written request by qualifying individual, representative or legal counsel. A copy of these type of reports can be obtained at the North Mankato Police Department no less than seven days after the accident. A case number is required.

Minnesota State traffic accidents reports filed with the State of Minnesota may be obtained through the MN Department of Public Safety, Driver and Vehicle Services; 445 Minnesota Street, Saint Paul, MN 55101. Phone number (651) 296-2940.

### **Attorneys/Insurance Companies Requests for Police Reports**

Attorneys or insurance companies requesting copies of police/accident reports are required to do so in writing on their agency letterhead and to provide a signed release from their client(s) with the report/accident report request. Requests can be mailed to the address below.

**North Mankato Police Department Records Unit**  
**1001 Belgrade Avenue; North Mankato, MN 56003**  
**Phone: 507-625-7883 Fax: 507-625-1327**

Attorneys requesting discovery in a criminal matter should send requests to the North Mankato City Attorney or Nicollet County Attorney Office pursuant to Minnesota Rules of Criminal Procedure.



**REQUEST FOR INFORMATION:  
POLICE REPORTS, CALLS FOR SERVICE AND OTHER DATA**  
North Mankato Police Department  
1001 Belgrade Avenue; North Mankato, MN 56003  
Phone: 507-625-7883 Fax: 507-625-1327 Email: tjunker@nmpd.org

Requests may be submitted by mail, fax, email or in person to the North Mankato Police Department during normal business hours (Monday - Friday, 8:00 a.m. to 5:00 p.m.; excluding holidays).

**REQUESTED BY**

Name	Date of Request
Address	Phone

Are you named in the data requested?  Yes  No  
If not, you may not be entitled to the data without a signed informed consent form from the data subject.

If the requested data is private, a signature and photo identification is required to ensure you are entitled to the data.

Signature of above requestor (Private Data) \_\_\_\_\_

If not appearing in person at the North Mankato Police Department, this signature must be notarized:

Subscribed and sworn to before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public Signature

**TYPE OF INFORMATION REQUESTED**

*The information you are requesting may or may not be available to you. After your request is reviewed, you will be notified when the information is available and if any fees will be assessed.*

I am requesting data in the following way:  Inspection (appointment to look at copy)  Pick up Copy  Mail Copy

Police Report

Type of Incident: \_\_\_\_\_

ICR/Case Number: \_\_\_\_\_

Date/Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Additional Information: \_\_\_\_\_

\_\_\_\_\_

Other Data Request

Detail of Data Desired: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Time Period: (From \_\_\_\_\_ to \_\_\_\_\_)

Location(s): \_\_\_\_\_

\_\_\_\_\_

Full Name and Date of Birth of Subject: \_\_\_\_\_

\_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

**TO BE COMPLETED BY DEPARTMENT STAFF**

RECORDS#:	<input type="checkbox"/> Data Released <input type="checkbox"/> Data Inspected Only <input type="checkbox"/> Request Denied <input type="checkbox"/> No Data
DATE COMPLETED:	
COST:	

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  Paid  Receipt Issued Receipt# \_\_\_\_\_