

**Hartland Police Department**

210 Cottonwood Ave  
Hartland, WI – 53029  
262-367-2323 Telephone  
262-369-2224 Fax  
police@villageofhartland.com

\*Fees: 25 ¢ copy fee one sided  
\$15.00 Audio/Video/Photos (each)  
Possible location and identification fee  
depending on the amount of reports  
requested.

**RECORDS REQUEST FORM**

Required for Disclosure of Personal Information or Highly Restricted Personal Information

The Federal Driver’s Privacy Protection Act (DPPA) (18 U.S.C. 2721) prohibits the disclosure of certain “personal information” or “highly restricted personal information” which originates from a state motor vehicle record. Under current controlling law, disclosure of each item “personal information” or “highly restricted personal information” must be justified by the specific permissible use identified below. Failure to provide such justification may result in redaction of the record requested. Such information shall not knowingly be disclosed or otherwise made available without the express consent of the person to whose information pertains or unless specifically permitted by the DPPA. For purposes of determining whether such information should be released or redacted, please complete and return this form.

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**\*\*\*PLEASE PRINT LEGIBLY\*\*\***

**REQUESTOR INFORMATION:**

Name and/or Company name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of request: \_\_\_\_\_

**CIRCLE THE REQUEST INFORMATION**

Crash report

Incident report

In house record request

Specify other: \_\_\_\_\_

**AUTHORIZATION**

I/We are authorized under the Driver’s Privacy Protection Act to obtain the identified records containing personal information based upon the following:

**Check all that apply**

\_\_\_\_\_ Authorized for use, if requester has obtained the written consent from the person about whom the information pertains. You must circle one of the options below.

- a. I am requesting a copy of my own record/records
- b. I am a parent or legal guardian of a minor child and I am requesting a copy of his/her record.
- c. I am requesting the record of another person and have attached their written and notarized consent.

\_\_\_\_\_ Authorized for use in connection with an civil, criminal, administrative, or arbitral proceedings in any federal, state, circuit, local, or tribal court or agency, or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution of enforcement of judgments and orders, or pursuant to an order of a federal, state, circuit, local, or tribal court.

\_\_\_\_\_ Authorized for use of research activities and producing statistical reports. As long as the personal information is not published, re-disclosed or used to contact individuals.

\_\_\_\_\_ Authorized representative, agent, contractor, or employed by such, of an insurer, insurance support organization, or self-insured entity and the vehicle/driving record(s) being requested will be used only in connection with the following:

- a. claims investigation
- b. anti-fraud activities
- c. rating or underwriting

\_\_\_\_\_ Authorized representative, agent, contractor, or employed by such, of a legitimate business and the vehicle/driving record being requested will be used for normal course of business, but only to:

- a. verify accuracy
- b. if such information as so submitted is not correct or is no longer correct, to obtain correct information, but only for purposes of preventing fraud, pursuing legal remedies, or collecting a debt.

\_\_\_\_\_ A government agency (federal, state, local or tribal) or employed by such, for the purposes of the government agency to carry out its official functions.

\_\_\_\_\_ A federal, state, circuit, local, tribal or employed by such, for the purposes of the court to carry out its official functions

\_\_\_\_\_ A law enforcement agency, or employed by such, for the purpose of the law enforcement agency to carry out its functions.

\_\_\_\_\_ For use in connection with matters of a motor vehicle or driver safety and theft; motor vehicle emissions, motor vehicle product alterations, recalls, or advisories, performance monitoring of motor vehicles, motor vehicle parts and dealers, motor vehicle market research activities, including survey research and removal of non- owner records from the original owner records of motor vehicle manufactures to carry out the purposes of the Automobile Information Disclosure Act, the Anti Car Theft Act of 1992, and the Clean Air Act.

\_\_\_\_\_ Authorized for use in providing notice to the owners of towed or impounded vehicles.

\_\_\_\_ Authorized representative or owner of a licensed private investigative agency or licensed security service and the vehicle/driving record is being requested for the use of purposes permitted under the Driver's Privacy Protection Act.

\_\_\_\_ Authorized as an employer, or its agent or insurer for use in obtaining or verifying information relating to a holder of a commercial driver license (CDL).

\_\_\_\_ Authorized representative or owner of a private toll transportation facility for use in the operation of the facility.

\_\_\_\_ For any other use specifically authorized under the law of the state that holds the record, if such use is related to the operation of a motor vehicle or public safety.

### **PENALTIES**

The Driver's Privacy Protection Act (DPPA) is enforced by the U.S. Department of Justice, which may seek civil and criminal penalties for improperly obtaining, disclosing, or using personal information from a motor vehicle record for a purpose not permitted by the DPPA. In addition, private citizens may also seek civil damages in federal court.

### **CERTIFICATION**

I agree that the use of the records I have requested is specifically authorized under the laws of the State of Wisconsin and the DPPA and that my intended use of the records is related to the operation of a motor vehicle or public safety or for other use as identified above.

I certify that the information and statements on this request are true and correct and understand that the unauthorized disclosure of information obtained from these records for a purpose other than stated on this request form, or the sale or other distribution of the information to the person or organization not disclosed in this request, may result in civil and criminal penalties imposed under Title 18 U.S.C. Section 2724

I further understand that I have the right to request a mandamus review of the responses provided to this request under Wisconsin Statute Section 19.37(1).

\_\_\_\_\_  
Requestor Signature

\_\_\_\_\_  
Date signed

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Information has been approved for release      YES      NO

Approved by: \_\_\_\_\_

Reason for denial: \_\_\_\_\_

J:PCWord:Clerical:Forms:Open