



A RESOLUTION REVISING THE CITY OF ALBANY POLICE DEPARTMENT PUBLIC RECORDS REQUEST FEES & PROCEDURES SCHEDULE AND REPEALING RESOLUTION NO. 6721.

WHEREAS, Oregon State Statutes allow for reasonable fees calculated to reimburse local government for costs of providing public records; and

WHEREAS, the Albany Police Department (APD) Records Fees & Procedures form was adopted as an exhibit to Resolution No. 5909 on June 10, 2010; and

WHEREAS, the APD Records Fees & Procedures form was last modified to include requests for video redaction through a third-party redaction software, by Resolution No. 6721 on June 27, 2018; and

WHEREAS, except for video redactions, all police reports, records checks, photographs, and recordings fees have not been increased since February 13, 2008; and

WHEREAS, the increase to fees will help cover administrative time spent on researching and preparing materials for public distribution.

NOW, THEREFORE, BE IT RESOLVED by the Albany City Council that the APD Records Fees & Procedures fee schedule be revised; and

BE IT FURTHER RESOLVED that the fee schedule in Exhibit A is hereby adopted; and

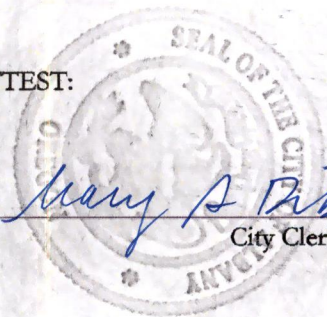
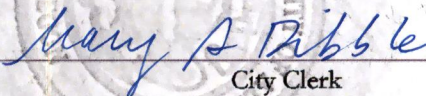
BE IT FURTHER RESOLVED that Resolution No. 6721 is hereby repealed.

DATED AND EFFECTIVE THIS 14TH DAY OF AUGUST 2019.



Mayor

ATTEST:

City Clerk



PUBLIC RECORDS REQUEST FORM

Albany Police Department

Exhibit A

Notice: Public Records laws are addressed in ORS Sections 192.314, 192.324, and 192.345. City of Albany Policy F-05-08, Public Record Requests, outlines the City's procedures. Fees are listed on the back of this form.

Requestor Information:

Name _____ Mailing Address _____

City _____ State _____ Zip Code _____

Daytime Phone/Cell Number _____ Fax Number _____ E-mail address _____

Requestor Signature: _____

Return Form To: Albany Police Department, 2600 Pacific Boulevard SW, Albany, OR 97321
 Fax: 541-928-6692 E-mail: nicole.loguidice@cityofalbany.net

Incident Number: _____	Incident Location: _____	
Date of Incident: _____	Time of Incident: _____	Officer: _____
Person(s) Involved: _____		
Name Scan: _____		
Amount Enclosed: _____	Non-refundable minimum \$11.00 fee for report requests includes records search, and up to ten single-sided or five double-sided pages	
Additional Amount Due at Pickup: _____	Non-refundable minimum \$10.00 fee for tape requests include records search and up to 15 minutes of tape reproduction	
Mailing Fee Included: Yes No (See reverse side for fee schedule)		

Mandatory Notification Statement per ORS 192.440 (2)(a-c)

Dear Requestor, thank you for your public records request:

The City does hold the records you've requested.

The City does not hold the record(s) you've requested.

We aren't certain whether the City holds the record(s) you've requested.

POLICE DEPARTMENT USE ONLY

We cannot supply the report you requested for the following reason (s):

	Cash or check for the correct amount was not enclosed
	The incident is still under investigation and cannot be released at this time
	We have no record involving this person/incident. Please check your information for accuracy.
	The incident is not in our jurisdiction and/or our department did not take the report. Please Contact:
	This incident involved an arrest and/or investigation that requires the prosecutor to authorize/provide this information. You should contact:
	Linn County District Attorney – P.O. Box 100, Albany, Or 97321 (541) 967-3836
	City Attorney Office – P.O. Box 40, Albany, OR 97321 (541) 926-5504
	Benton County District Attorney – 120 NW 4 th , Corvallis, Or 97330 (541-766-6815)

Payment Received:	Cash/Check/Visa	Date received:	
	Released by:	Date released:	

1. RECEIVED	2. MANDATORY NOTIFICATION	3. INFORMATION/CLARIFICATION	4. FEES
Date: _____ RIM Coordinator: _____ Calendar Year request #: _____	Date: _____ Method (Circle): Copy of Form E-mail Mail Fax	Request Date: _____ Date Received: _____	Total Fees: _____ Date Notified: _____ Date Paid: _____
5-day count begins	10-day count begins	10-day count stops while waiting for response; restarts when received*	10-day count stops while waiting for payment; restarts when received*

* If no response is received within 60 days, the Public Records Request is closed.



ALBANY POLICE DEPARTMENT RECORDS FEES & PROCEDURES

All requests require a **non-refundable advance payment** of \$11.00 to cover research fees

Police Reports	
Police Incident Reports Computerized Incident Report (CAD) Miscellaneous Police Documents	\$ 11.00 Research fee includes up to ten single-sided copies. Lengthy reports requiring over 15 minutes to process will accrue additional charges at a rate of \$44.00 per hour plus additional copy charges.
Copy charges	Additional \$.25 (cents) per side after ten pages
Postage for mailing reports	\$ 2.00 for up to ten pages, \$.25 (cents) per page after ten pages.
Records Checks (Records only available back to 1990)	
Person	\$ 11.00 per person
Letters of Clearance	\$ 11.00 per person
Location	\$ 11.00 per 12-month period
Statistics	\$ 11.00 per requested activity
Postage for mailing records checks	\$ 2.00 for up to ten pages, \$.25 (cents) per page after ten pages.
Supplemental Fees (in addition to the fees identified above)	
Photographs	
Photos saved to Compact Disc	\$10.00 per CD
Photos printed on paper	\$ 2.50 per sheet (up to 4 photos per sheet)
Photos reproduced from negatives	\$10.00 for first 24 prints/per single role, \$.50 (cents) for each additional print
Postage for mailing photographs	\$ 2.00 for up to ten photos/pages. \$.25 (cents) per photo/page after ten pages. \$ 2.00 per CD
Recordings	
Compact Disc, DVD or Cassette tape recordings	\$10.00 for first 15 minutes of staff time, \$11.00 for each additional 15 minutes
Postage for mailing recordings	\$2.00 per tape/CD/DVD

A request for police records information can take up to two weeks to process. Requested information will be available for pickup at the front counter of the Albany Police Department or may be mailed to you for an additional fee. All items must be picked up within 30 days after notification that the information is ready, otherwise it will be destroyed and another request will need to be made.

*Requests can be completed in a timely manner if the data you provide is complete and accurate. Please provide the full name of the individual, their date of birth, driver's license number and social security number. Any special requests not indicated above will be charged at a minimum hourly rate of \$28.00/per hour, plus additional copy charges and at the discretion of the Albany Police Department. We appreciate your cooperation and assistance in making this process efficient.

**2600 Pacific Boulevard SW
Albany, OR 97321
541-917-7680**