

# GRAND JUNCTION REGIONAL COMMUNICATION CENTER

## AUDIO REQUEST FORM

GJRCC Incident #: \_\_\_\_\_ GJRCC Audio Request #: \_\_\_\_\_  
Date Requested: \_\_\_\_\_ Date Required/Court Date: \_\_\_\_\_  RUSH  
Requestor's Name: \_\_\_\_\_ Requesting Agency/Firm: \_\_\_\_\_  
Phone: \_\_\_\_\_ Ext: \_\_\_\_\_ Email: \_\_\_\_\_  
Reason for Request: \_\_\_\_\_

### INCIDENT INFORMATION

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_ Incident Type: \_\_\_\_\_  
Location of Incident: \_\_\_\_\_  
Defendant: \_\_\_\_\_  
Associated Persons: \_\_\_\_\_  
Specific Information Needed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone:**  911  Non-Emergency  Admin  Other \_\_\_\_\_  
**Radio Traffic:**  PD  Fire/Ambulance  MCSO  Other \_\_\_\_\_  
Start time \_\_\_\_\_ End time \_\_\_\_\_

#### NOTES AND FEES:

- **Discovery requests for defense of criminal charges are to be directed to the prosecutor's office (DA or City Attorney)**
- Other requests, submit by email [gjrccaudiorequests@gjcity.org](mailto:gjrccaudiorequests@gjcity.org) (preferred), fax to 970-245-7206, or drop off at GJPD records.
- Allow two weeks for processing from the date received by GJRCC. RUSH requests must be **clearly** specified as rush.
- **All requests are billed at \$6.00 per recording. Multiple recordings cannot be combined.**
- **A non-refundable processing fee of \$6.00 is required for all requests.**
- The first hour of research is included in processing fee (\$6.00). Additional time is charged at \$5.00 per quarter hour.
- Criminal justice records are released only after the Citizen Advisement form has been acknowledged for all records except traffic accidents per C.R.S. §24-72-305.5
- For Colorado State Patrol (CSP) Radio Traffic please call 970-249-4392
- Questions? Please call 970-549-5405

# GRAND JUNCTION REGIONAL COMMUNICATION CENTER (GJRCC)

## **AUDIO REQUEST FORM**

### **FOR GJRCC USE ONLY**

Date received by GJRCC: \_\_\_\_\_ Staff initials: \_\_\_\_\_  
 Date completed: \_\_\_\_\_ Staff initials: \_\_\_\_\_

Routed       GJPD       DA's Office       City Attorney  
 MCSO       Fruita PD       Palisade PD  
 GJ Fire       Other: \_\_\_\_\_

Notified       Phone Contact       Phone message       E-Mail  
 re: Prepaid Mail       Other: \_\_\_\_\_

**Citizen Request**

Criminal Case?       **Yes** Approved by GJPD Case Agent or other Agency?  
 **Yes** (Contacted DA for approval to process request)  
 **No** (Notify requestor) Date: \_\_\_\_\_  
 DA Approval?  
 **Yes** (Contacted DA for approval to process request)  
 **No** (Notify requestor) Date: \_\_\_\_\_  
 **No** (Send copy directly to City Attorney for review.)

Delivered to City Attorney for review. Date: \_\_\_\_\_ Staff initials: \_\_\_\_\_

**CITY ATTORNEY:**

Is evidence available for release as open record?  
 **Yes** (Contact GJPD Lab)  
 **No** Reason for denial: \_\_\_\_\_  
 Date City Attorney notified requestor: \_\_\_\_\_  
 Not notified.

Citizen request received from City Attorney in Evidence after review.  
 Date: \_\_\_\_\_ Staff initials: \_\_\_\_\_

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>Non-refundable Processing Fee Paid</b>	\$
Total # Discs Additional Fee for exceeding 1 disc (@ \$6.00 each)	
Search & Redaction Fee Exceeding 1 Hour (@ \$5/ Quarter Hour)	\$
Other:	
<b>Total Fee Due</b>	\$
<b>Payment Received By:</b>	

Request received by:

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date