

RICHMOND POLICE DEPARTMENT
RICHMOND, VIRGINIA

DATE: _____

TO: Office of Legal Affairs
200 W. Grace Street
Richmond, VA 23220

First Name Middle Initial Last Name Suffix (if any)

FROM: _____
Company Name (if applicable)

Street City State Zip Code

SUBJECT: Request to Inspect, Copy or Reproduce Public Records – Virginia Freedom of Information Act

My preferred contact method is: Email Phone U.S. Mail

Email: _____

Phone #: _____

Address: _____
Street City State Zip Code

Do you reside within the State of Virginia? Yes No

RECORDS REQUESTED

Please give a specific description of the records you are requesting, including any information that may help us to locate them more quickly (additional pages may be attached, if necessary)

- The Richmond Police Department may make reasonable charges not to exceed its actual cost incurred in accessing, duplicating, supplying, or searching for the requested records. VA Code §2.2-3704(F)
- If the charges for producing the requested records are likely to exceed \$200.00, the Richmond Police Department may require a deposit before processing the request. VA Code §2.2-3704(H)
- Some records are exempted from disclosure requirement. Criminal investigative files may be withheld pursuant to VA Code §2.2-3706(B)(1). For more information about exemptions, please refer to the Virginia Freedom of Information Act, VA Code §§2.2-3700 – 2.2-3714.

If you have additional questions about the Virginia Freedom of Information Act, please feel free to consult: www.rva.gov/FOIA
Email request to: [RPD's Office of Legal Affairs - FOIA Request](#)