Daniel Lurie
Mayor

Department of Emergency Management
1011 Turk Street, San Francisco, CA 94102

Phone: (415) 558-3826
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Mary Ellen Carroll
Executive Director

CUSTODIAN OF RECORDS
REQUEST FOR DISPATCH RECORDS INSTRUCTIONS

(San Francisco Sunshine Ordinance, Administrative Code §67.2.seq.)

Dear Requestor:

Fill out each line as applicable. Specifically identify the information you are attempting to obtain.

The following information must be supplied to ensure your request is accepted:

- ✓ **Date of your request**
- ✓ **Name, address and contact telephone number**
- ✓ **CAD or police case number (if available)**
- ✓ **Date of the incident**
- ✓ **Location of the incident – if requesting address history, please list the date range**
- ✓ **Any other identifying information (i.e. requests for all calls to a particular location)**

If you do not have all of the above required information, please fill out the form to the greatest extent possible. *Incomplete requests may delay our ability to process the request in a timely manner or at all.*

We can use a police case number to locate your CAD record; however, **we do not have access to San Francisco Police reports.** For copies of a police report, contact SFPD – Record Management via their web portal at www.sanfranciscopolice.org. You may also call 415.575.7232 or email them at ***sfpd.cisu.reports@sfgov.org***.

If your request requires a payment, we currently accept cash, check, or money order. To avoid delays in receipt of your request, please include payment in the exact amount due with the request form.

WE CANNOT PROVIDE RUSH SERVICE. Requests are processed in the order received. While we process requests as quickly as possible, we have up to 10 calendar days to accept or deny the request. It is not necessary to call for the status of your request.

You may submit a completed form via US mail, in person, fax, or email.
In person: There is a secure drop box in our lobby along with additional blank forms for your convenience.
Fax: You may fax us at 415.558.3869.
Email: dem.records@sfgov.org – Printouts only
We cannot return records by email at this time. You must choose whether to pick up the responsive records in person, or have them mailed to you via the return address you include on the form.
Mail: Department of Emergency Management
Attn: Custodian of Records
1011 Turk St
San Francisco CA 94102

SAN FRANCISCO DEPARTMENT OF EMERGENCY MANAGEMENT

Custodian of Records

Request for Dispatch Records

(San Francisco Sunshine Ordinance, Administrative Code §67.1.seq.)

Date of Request: _____ **NOTE: No Same Day Service Available**

Requestor Name: _____

Address: _____

City/State/Zip: _____ Telephone: _____

Records Requested: ☐ CAD Printout ☐ Telephone Audio ($35) ☐ Radio Audio ($35)

☐ Other (specify): _____

CAD Number: _____ Case or Incident Number: _____

Date of Incident: _____ Time of Incident: _____

Incident Location: _____

Other identifying information or details (be specific): _____

Fee Schedule: (City / County employees - DO NOT USE THIS FORM)

Audio: $35.00 for phone audio for each CAD requested; $35.00 for radio audio for each CAD requested.
Print: Printouts over 100 pages billed at $0.10 per page.
Payment is by cash, check or money order

When Requesting by Email: Send the **completed form** to dem.records@sfgov.org. (If you are requesting audio files, please mail the request form with exact payment to avoid a delay in receipt of the records requested. We cannot process electronic payments.) Please make checks payable to City & County of San Francisco

Method of Delivery: Please check an option below. **We cannot currently send records by email**

☐ I would like to inspect records by **mail**. Please send the records to the address above. I understand I must pay any applicable fees before the Department will send the records.

☐ I would like to inspect & **pick up a copy** of the records from the Department of Emergency Management. Please advise when the records are ready. I understand I must pay any applicable fees before the Department will release copies to me.

For Office Use Only

Date Completed: _____ Completed By: _____

Comments: _____