

BODY-WORN CAMERA VIDEO

PUBLIC RECORDS REQUEST

Pursuant to NRS 239

*This form is **ONLY** to be used to request body-worn camera video that is in the legal custody or control of the Las Vegas Metropolitan Police Department.*

INSTRUCTIONS:

REQUESTS CAN BE MADE IN WRITING, IN PERSON, VIA EMAIL, OR TELEPHONICALLY. ALL INFORMATION REQUESTED ON THIS FORM MUST BE PROVIDED REGARDLESS OF THE METHOD OF REQUEST. INCOMPLETE REQUESTS WILL NOT BE HONORED. ALL FORMS MUST BE SIGNED BEFORE THE REQUEST WILL BE PROCESSED. **ONLY VIDEOS THAT ARE CLEARLY DEFINED AS PUBLIC RECORDS WILL BE RELEASED.** YOU WILL BE CONTACTED WITHIN FIVE (5) BUSINESS DAYS TO ACKNOWLEDGE RECEIPT OF YOUR REQUEST. **YOU WILL BE CONTACTED IN WRITING IF THE REQUESTED VIDEO CANNOT BE LOCATED, NO LONGER EXISTS, OR IS NOT A PUBLIC RECORD.**

IN WRITING:

TYPE OR USE BLACK INK ONLY. YOU MAY:

1. FAX TO (702) 828-2688 OR
2. MAIL TO:
 BWC DISSEMINATION
 LAS VEGAS METROPOLITAN POLICE DEPARTMENT
 BUILDING "B", 5th FLOOR
 400 S. MARTIN LUTHER KING BLVD.
 LAS VEGAS, NEVADA 89106

VIA EMAIL:

AFTER COMPLETING THE INTERACTIVE FORM ON YOUR COMPUTER, SAVE IT FOR YOUR RECORDS AND ADDRESS AN EMAIL TO BWCRECORDSREQUEST@LVMPD.COM WITH YOUR COMPLETED FORM AS AN ATTACHMENT.

IN PERSON:

BRING THE COMPLETED FORM TO LVMPD HEADQUARTERS
RECEPTION DESK, BUILDING B
400 S. MARTIN LUTHER KING BLVD.
LAS VEGAS, NEVADA 89106

BY PHONE:

(702) 828-1905

NOTE: TELEPHONIC REQUESTS MUST BE FOLLOWED BY VERIFICATION OF SUBMITTED INFORMATION AND A SIGNATURE, IN PERSON, AT THE ADDRESS SHOWN ABOVE BEFORE PROCESSING.

REQUESTOR INFORMATION (Information with an asterisk (*) is required.)

Name*	Phone Number*	Email Address:	
Mailing Address:*	City:*	State:*	Zip Code:*

BWC VIDEO DESCRIPTION

Identify the video you are requesting. Please be as specific as possible to assist staff in locating the video. Define the content and narrow the scope as much as possible since videos can be lengthy. Body Camera Detail may contact you for clarification or additional information.

By signing below, I certify that the information above is true and correct to the best of my knowledge. I also understand that there is a fee for redacting and copying the video and that its release is contingent upon full payment. By Nevada law, some videos may not be a public record.

Date: _____

X

Requester Signature Required

LVMPD STAFF USE ONLY

Assigned To	Receipt of Request (Date)	Acknowledgement or Follow-up Contact (Date)
Cost Estimate (Amount)		Receipt Number
Request Status <i>(Check one)</i> <div style="text-align: center; padding: 5px;"> Authorization to Proceed Request Withdrawn Record Confidential by Law </div>		Notes:
Payment Received (Amount)		

Date Request Closed: _____ By: _____
Name and P#

Reviewed By: _____
Name and P#