



**WEBER AREA DISPATCH 911
AND
EMERGENCY SERVICES DISTRICT**

Audio/Record Request Form

For Use by Weber/Morgan Public Safety & Prosecution Agencies Only

Agency Making Request:

Person Making Request:

Contact Phone:

Email Address:

(Must be an agency email address)

Incident (case) #:

Type of Incident:

Crime Classification: Misdemeanor

Felony

N/A

Date of Incident:

Time of Incident:

Describe the record you are requesting:

Reason for Request:

Dissemination Preference:

FTP -- A link to the file will be emailed to you.

CD -- You will receive an email when the CD is ready for pick up.

Submit form via email to shiftsupervisors@weber911.org or print it and fax to 801-395-8232.

Date Request Received:

Request was: Approved

Denied

Pending

Reason denied or pending:

Audio created by:

Requestor notified by:

Date :