



Jefferson County Emergency Communications Center

28 Industrial Blvd., Suite 10x22000, Kearneysville, WV, 25430
Phone: 304/728-2100 • Fax: 304/725-5436

INCIDENT INFORMATION/ VOICE LOGGING RECORDER REQUEST NON-CRIMINAL JUSTICE AGENCY

Date: _____ Telephone: _____

Requestor Name / Agency / Title: _____

Court Docket Number: (if applicable) _____

I am requesting:

_____ Copy of Tape _____ Copy of Incident Card(s)

The following information is needed in order for the Emergency Communications Center to process your request. A fee schedule applies for all information requested in written or audio format and all fees are due prior to the release of any documents. Checks made payable to “Jefferson County Emergency Communications”.

INCIDENT DATA

Reason for Request: _____

Date of Incident: _____ Time of Incident: _____ to _____

Agency / Individuals Involved:

Location/Nature of Incident:

Signature: _____ Date: _____

Address _____

Note: This tape request automatically generates a copy which will be provided to the Jefferson County Prosecuting Attorney's Office for cases on a Jefferson County Court Docket

Request Number: _____ Request Completed By: _____

Released to: _____ Released by: _____

Date: _____