



# NEWBERRY COUNTY SHERIFF'S OFFICE

## FREEDOM OF INFORMATION ACT REQUEST FORM

The South Carolina Freedom of Information Act is found in South Carolina Law Title 30 Chapter 4. It is the belief and practice of this agency that the public is entitled to know the activities of government agencies. It is our intent to comply with this law and create an environment of information sharing with the public to establishment partnerships with the citizens we serve.

The Newberry County Sheriff's Office has established fees for the production of records in accordance with the South Carolina Freedom of Information Act. Those fees are posted at the Newberry County Sheriff's Office and indicated on this form. Please complete as much of the information below as possible to aid us in responding to your request.

**ALL INFORMATION MUST BE PRINTED/TYPED AND LEGIBLE**

### Information Requested

Date of Request: \_\_\_\_\_

If more than one document is being requested, please check the appropriate boxes.

- |   |   |
|---|---|
| <input type="checkbox"/> Incident Report (\$3.00/report)  | <input type="checkbox"/> 911 Tapes (\$10.00 per Incident)                             |
| <input type="checkbox"/> Local Criminal Records Check<br>(Newberry County Only, \$3.00 per history) | <input type="checkbox"/> Other (Cost Estimates Provided Before Production of Records) |

**Please provide as much information as possible to aid us in our search as to avoid unnecessary delay in our response.**

Records Requested: *(If additional space is need, continue on page 2 or attach additional sheets if needed.)*

\_\_\_\_\_  
\_\_\_\_\_

Date this happened: \_\_\_\_\_ If known, provide the Sheriff's Office Case #: \_\_\_\_\_

Where did this happen? \_\_\_\_\_

Who was Involved: \_\_\_\_\_

Provide as much of the following information as possible about this person:

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ SS #: \_\_\_\_\_

Please give any additional information about the request that may aid in our search:

\_\_\_\_\_  
\_\_\_\_\_

*(If additional space is needed, continue on page 2 or attach additional sheets if needed.)*

### Requestor's Information

Person Making Request: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Best Telephone Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**You must read the following and check the box before this Request can be processed:**

- South Carolina Code of Laws Section 30-2-50 expressly prohibits all requestors from obtaining or using public records for the purpose of commercial solicitation to any person in this State. This section further makes it the duty of the public body to notify all requestors that any such solicitation is unlawful. By checking this box, you affirm that you have received this notification and could face penalty if you violate this section of law.*

**THIS FORM CONTINUES ON PAGE 2.**

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*(Continued)*

Pursuant to the South Carolina Freedom of Information Act, the agency has fifteen (15) working days to respond to the request. Additional delays will be documented in writing to the requestor along with the reason for the delay in the production of records. Certain information may be redacted from the information you receive. If information is redacted or denied, specific sections of the law will be cited in the response to justify such redaction or denial.

**This form may be submitted in the following manners:**

**In person:** Newberry County Sheriff's Office during normal business hours.  
550 Wilson Rd, Newberry Monday - Friday, 8:30am - 5:00pm

**Mailed:** Newberry County Sheriff's Office  
PO Box 247  
Newberry, SC 29108-0247  
Please mark on the envelope: "FOIA REQUEST"

**Faxed:** (803) 321-2173

**Email:** [FOIA@ncso.sc.gov](mailto:FOIA@ncso.sc.gov)

To expedite the process, it is suggested that those requests made in person or by mail include the anticipated payment. If the amount is more than the amount submitted additional amounts will be billed. If the amount is less than submitted, a refund will be issued. Those submitting a request by fax or email will receive notification that the request has been fulfilled within compliance of the law including a cost for the search and production of the records. The requested information will be provided upon payment of those fees.

Payment must be in cash or Money Order. NO Personal Checks. Businesses may pay by Business Checks with prior approval. The requested copy(s) will be forwarded upon receipt of payment.

If you have any questions or need further assistance, please contact our office at (803) 321-2211 or email at [FOIA@ncso.sc.gov](mailto:FOIA@ncso.sc.gov).

**If needed, use the space below to continue information from Page 1 that may aid in our search:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR SHERIFF'S OFFICE USE ONLY**

Date Request Received: \_\_\_\_\_ Submitted by:  In person  Mailed  Faxed  Emailed  
Date Payment Received: \_\_\_\_\_ Amount Due: \_\_\_\_\_ Method of Payment: \_\_\_\_\_  
Case #: \_\_\_\_\_  
CAD #: \_\_\_\_\_ Start: Date \_\_\_\_\_ Time \_\_\_\_\_ End: Date \_\_\_\_\_ Time \_\_\_\_\_  
Records Released By: \_\_\_\_\_ Date of Release: \_\_\_\_\_