



# Information/Records/Evidentiary Request

Administrative Services Section

TSE | Tri State Enforcement

TSE

Form: IRER-1.2

**NOTICE:** This form is required for the request of information, records, and/or evidentiary articles. TSE only accepts requests via this form. TSE is a Freedom of Information Act exempt entity under 5 U.S.C. § 552. TSE does not accept Freedom of Information Act requests.

► **START HERE - Type or print in black ink.**

## Part 1. Type of Request

Select **only one** box.

**NOTE:** If you are filing this request on behalf of an entity - please ensure both your information and the entity information is provided.

- ☐ Information Requests
- ☐ Records and/or Evidentiary Requests

## Part 2. Requestor Information

1. Are you the Subject of Record for this request?  
☐ Yes ☐ No

### Requestor's Full Name

- 2.a. Last Name
- 2.b. First Name
- 2.c. Entity

### Requestor's Mailing Address

- 3.a. In Care Of Name (if any)
- 3.b. Street Number and Name
- 3.c. ☐ Apt. ☐ Ste. ☐ Flr.
- 3.d. City or Town
- 3.e. State  3.f. ZIP Code
- 3.g. Province
- 3.h. Postal Code
- 3.i. Country

## Requestor's Contact Information

4. Requestor's Daytime Telephone Number
5. Requestor's Mobile Telephone Number
6. Requestor's Email Address

## Requestor's Certification

By my signature, I consent to pay all costs incurred for search, production, and review of records, up to **\$125**.

- 7.a. Requestor's Signature  
➡
- 7.b. Date of Signature (MM/DD/YY)

## Part 3. Description of Records Requested

**NOTE:** While you are not required to respond to every item in **Part 3.**, failure to provide complete and specific information may delay processing of your request or create an inability for Tri State Enforcement (TSE) to locate and/or release the records or information requested.

8. **Purpose (Required:** You are required to describe and explain the purpose of your request.)

## Description of Record(s) Requested

**Part 3. Description of Records Requested**  
(continued)

***Date of Incident of Record(s) Requested***

If applicable, please provide the date of incident, if the records requested are pertinent to an incident that occurred.

9. Date MM/DD/YY

***Location of Incident of Record(s) Requested***

**10. Name**

11. Address	
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12. City, ST, Zip

## Part 4. Other Information About the Request

[illegible]

**14.** Name(s) of TSE personnel/Officer(s) involved, if known/if applicable:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**15. Additional information regarding records sought.**  
Provide additional of the records you are seeking -  
continued from Part 3, Page 1.  
**Additional Information:**

#### Part 4. Verification of Identity - Subject of Record

**NOTE:** If the request relates to information regarding a specific known individual, please complete all portions of **Part 4**.

*Full Name of the Subject of Record*

16. Family Name (Last Name)

17. Given Name

18. Middle Name

***Mailing Address for the Subject of Record***

19. In Care Of Name (if any)

20. Street Number and Name

21. ☐ Apt. ☐ Ste. ☐ Flr.

22. City or Town \_\_\_\_\_

23. State  24. ZIP Code

25. Country	
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### Other Information for the Subject of Record

26. Date of Birth (mm/dd/yyyy)

27. Drivers License / ID Number	
State of Issuance	

28.	Social Security No.				-			-			
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29. Location of Birth

30. Mobile Telephone Number (if known)

**31. Email Address (if known)**

#### Part 4. Verification of Identity and Subject of Record Consent (continued)

##### *Signature and Notarized Affidavit or Declaration*

Select **only one** box.

**NOTE:** In most cases the Subject of Record **MUST** provide a signature in **No. 32. Notarized Affidavit of Identity** OR **Item No. 33. Declaration Under Penalty of Perjury**. If the Subject of Record is requested under judicial authority, mark **Item No. 34.** and attach proof. If the Subject of Record is not a known person, or consent cannot be obtained, mark **Item No. 35.** and attach a written explanation on an official letterhead and remit with this request for processing.

**32. ☐ Notarized Affidavit of Identity**

(Do **NOT** sign and date below until the notary public provides instructions to you.)

By my signature, I consent to TSE releasing the requested records to the requestor (if applicable) named in **Part 2**. I also consent to pay all costs incurred for search, duplication, and review of documents up to **\$125** (if filing this request for myself).

\_\_\_\_\_  
Signature of Subject of Record

\_\_\_\_\_  
Date of Signature (MM/DD/YY)

Subscribed and sworn to before me on this \_\_\_\_\_

day of \_\_\_\_\_ in the year \_\_\_\_\_.

Daytime Telephone Number \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
My Commission Expires on (MM/DD/YY)

**33. ☐ Declaration Under Penalty of Perjury**

By my signature, I consent to TSE releasing the requested records to the requestor (if applicable) named in **Part 2**. I also consent to pay all costs incurred for search, duplication, and review of documents up to **\$125** (if filing this request for myself).

I certify, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is complete, true, and correct.

\_\_\_\_\_  
Signature of Subject of Record

\_\_\_\_\_  
Date of Signature (MM/DD/YY)

**34. ☐ Judiciary Request: Subject of Record (attach order)**

**35. ☐ Other (attach explanation on official letterhead)**

#### Part 5. Requestor Certification

**NOTE:** The Requestor must complete the certification, **No. 36.** in order for this request to be processed.

**36. Certification Under Penalty of Perjury**

By my signature, I consent to TSE releasing the requested records, as specified to myself (requestor) and/or my custodial entity (if applicable) named in **Part 2**. I also consent to pay all costs incurred for search, duplication, and review of documents up to **\$125**. I certify that the request for this information is for a lawful and permissible purpose as I have indicated and defined in **Appendix "A"**, on **Page 4** herein.

I certify, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is complete, true, and correct.

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date of Signature (MM/DD/YY)

\_\_\_\_\_  
Entity (if applicable)

\_\_\_\_\_  
ORI No. (if applicable)

#### TSE USE ONLY - DETERMINATION

\_\_\_\_\_  
Reviewed By

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

☐ **Approved**  
☐ **Denied**

\_\_\_\_\_  
Notes

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## Appendix "A" - Lawful and Permissible Uses

In order to release records, the requestor must first have a lawful and permissible purpose for the request. Please review the lawful and permissible use purposes below. **Requestor:** place your initials within only **ONE** box indicating your purpose.

01. ☐ For official use by a Government Agency.
02. ☐ For official use by a Law Enforcement Agency.
03. ☐ For official use by any authorized entity or individual acting on behalf of a Government or Law Enforcement Agency.
04. ☐ Relating to, or for the prevention of fraud.
05. ☐ Pursuing legal remedies, or for child support enforcement.
06. ☐ Recovery on a debt or security interest.
07. ☐ For use in connection with any civil, criminal, administrative, or arbitral proceeding in any Federal, State, or local court or agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a Federal, State, or local court.
08. ☐ For use by any insurer or insurance support organization, or by a self-insured entity, or its agents, employees, or contractors, in connection with claims investigation activities, antifraud activities, rating or underwriting.
09. ☐ For use by any licensed private investigative agency or licensed security service for any purpose permitted under this appendix.
10. ☐ For use by any requester, if the requester demonstrates it has / they have obtained the written consent of the person or persons to whom the information pertains.
11. ☐ For use by any requester, if the requester is the owner, leasee, operator, or occupant of a property, **and** the request does **not** include specific subject of record (persons) request(s).
12. ☐ Lawful due diligence research.
13. ☐ Other, not listed above. (Specify:)

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