



Village of Siren Police Department

P.O. Box 23 • Siren, Wisconsin 54872
(715) 349-7181 • Fax: (715) 349-2830
email: sirenpd@villageofsirenwi.gov



2025 OPEN RECORDS REQUEST FORM

Request is: Verbal Written Both

Will Pick Up Mail Email

Person Requesting Records			
FULL NAME		Date of Birth	
Address		Phone	
City/State/Zip		Cell Phone	
Email:			

RECORDS REQUESTED: (CHECK TYPES) Incident/Arrest Accident Other (describe below)

Person Requesting Records			
Case Number		Date of Incident	
Location of Incident			
Regarding			
Full Name		Date of birth	
Others Involved		Dates of birth	
Others Involved		Dates of birth	
Description			

The requester must allow the department **10 business days** to process the record request. Dispatch recordings or jail records are under the custody of the Burnett County Sheriff's Office.

Record Type	Cost
Accident Report—DOT Crash Report copy	\$5.00
Incident Report / Witness Statement-- every 10 pages	\$5.00
Reproduced Photo—color copy (2 per sheet) priced per sheet	\$2.00
Audio / Video Recording via physical media (thumb drive, DVD)	\$15.00
Location Fees if cost of locating records only is \$50 or more—fee is based on staff time for location	\$20/hr.
Return by Fax	\$2.00
Postage—actual plus \$2 materials	

I understand this request will become part of the files maintained by the Siren Police Department and is subject to open records. I further acknowledge that release of this information to me does not authorize me to release this information to unauthorized third parties to include posting on social media, or to otherwise use this information in a negligent or illegal manner.

Signed: _____ Date: _____



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2025 OPEN RECORDS REQUEST FORM (internal use)

Reviewed by: _____ Date: _____ OK ___ Denied ___ Letter _____

Delivered/Mailed by: _____ Date: _____