

# Public Information Request

In accordance with the Public Information Act, Chapter 552 of the Texas Government Code, the City of Crowley makes all of its public records available to citizens.

The Public Information Act does not require governmental bodies to create new information, perform legal research, or to answer questions. The request must ask for records or information already in existence. The City of Crowley will not comply with a standing request for information to be collected or prepared in the future.

The City of Crowley will respond within 10 business days to information requests. The City may collect a fee as prescribed by law or regulation for the requested documents. If a fee is not prescribed by law or regulation, the fee shall be the actual cost of duplicating the record.

For more information on the Texas Public Information Act, please visit the [Texas Attorney General website here](#).

## Supporting Documents

City of Crowley Public Information Request Form (pdf) 1.25 MB
Public Information Request Exclusions 151.73 KB
Costs for Public Information Requests 59.88 KB
Public Information Act Pamphlet 71.7 KB

You must have JavaScript enabled to use this form.

- Current Start
- Preview form
- Complete

Requester's Information

Name

Address

City

State

Zip

Email

Phone

#### Records Request

##### Type of Records

##### Type of Records

- ☐ Vehicle accident report
- ☐ Police Records
- ☐ Fire
- ☐ Emergency Medical Services (EMS)
- ☐ Permits
- ☐ Other

#### Description of requested records

Please be as specific as possible, including dates, names, numbers, or other identifiers that will assist in locating the information you seek. Examples: "I hereby request the City's file on [event, project, incident, etc.]" "I need Police report [number], dated [date], and involving [description and date]". "I am requesting a certificate of occupancy for [X address]."

#### Exclusions

##### Exclusions

The City is prohibited from releasing some types of information. In an effort to expedite your request, please check the box if you agree to exclude or redact from the requested records the information found in these exclusion categories. You can see a list of the most common exclusions in attached file listed at the top of this form under supporting documents.

- ☐ I agree to the exclusions.
- ☐ I DO NOT agree to the exclusions.

#### Right to access

##### Rights to access

Some information maybe releasable under Tex Gov't Code 552.023, Special Right of Access to Confidential Information. Identifying a Special Right to Access may help to expedite your request. Are you the parent, guardian, or authorized representative with a Special Right to Access?

- ☐ Yes
- ☐ No
- ☐ N/A

## Relationship

My relationship/Special Right of Access:

## Method

### Method

Preferred method of receiving documents:

- ☐ Emailed
- ☐ Mailed
- ☐ Inspect onsite
- ☐ Pick-up (Certain records may require pick-up)

## Request for Accident Reports

• Section 550.065(c-1) of the Transportation Code requires the City to provide a redacted copy of an accident report to all members of the public. • Section 550.065(c) of the Transportation Code provides that certain individuals have a right of access to a full copy of an accident report. • The City may need additional information from you to determine whether you have a right of access to a full copy of the accident report. • Section 550.065(d) of the Transportation Code allows the City to charge \$6 for the accident report and \$2 to certify the report.

### Redaction

#### Redaction

Please select one:

- ☐ I request a redacted copy of the accident report
- ☐ I request a full copy of the accident report

## Certification

### Certification

I hereby certify my connection to the accident is:

- ☐ I am the driver or any other person involved in the accident.
- ☐ I am the authorized representative of any person involved in the accident.
- ☐ I am the employer, parent, or legal guardian of a driver involved in the accident.
- ☐ I am the owner of a vehicle or property damaged in the accident.
- ☐ I am a person who has established financial responsibility for a vehicle involved in the accident.

- ☐ I am currently a representative or employee of an insurance company that issued an insurance policy covering a vehicle or any person involved in the accident.
- ☐ I am currently a person under contract to provide claims or underwriting information to a person or entity described in the preceding two items.
- ☐ I am currently a representative or employee of a radio station, television, or newspaper.
- ☐ I am a person or entity who may sue because of death resulting from the accident.
- ☐ I do not fall within any of the above categories. I am requesting a redacted accident/crash report.

Date/Time of Accident

Location of Accident

Name of person(s) involved

Case number (if known)

Electronic Signature

The requester acknowledges that by clicking the "Submit" or similar button on this website, you are indicating your intent to sign the relevant document or record and that this will constitute your legal signature. Perjury is a Class A misdemeanor under Texas Penal Code §37.02 and punishable by a fine not to exceed \$4,000, up to a year in confinement in jail, or both such fine and confinement. I declare under penalty of perjury that the foregoing answers and information, including my identity, are true and correct.

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