CITY OF SANTA ANA

Clerk of the Council Office

20 Civic Center Plaza, Room 809
P.O. Box 1988, M-30
Santa Ana, CA 92702
PHONE: (714) 647-6520
FAX: (714) 647-6956

PRINT

Email Form

Clear Form

OFFICIAL RECEIPT DATE

Request for Public Records

Your request will be processed in compliance with the Public Records Act California Government Code § 6253.

Public records are accessible at all times during regular office hours and can be inspected at no charge. The more specific you are with the information you are requesting, the more responsive we may be to your request.

Copies may be provided in most instances upon request, unless documents are archived or need to be gathered. Requestor will be notified in writing if additional time will be necessary pursuant to the Public Records Act. All document duplication fees are due and payable in full and are based on the City's current fee resolution.

Email request to: Public_Records@Santa-Ana.org

Person requesting information:

Name _____
First Middle Last

Address _____
Street City Zip Code

E-mail _____ Phone _____ Fax _____

I would like to (check one) ☐ INSPECT ☐ OBTAIN A COPY OF ($.20/page unless otherwise specified by law)

FOR POLICE AUDIO RECORDINGS, NOTE THE FOLLOWING: Recordings are not available on all telephone lines received in the Police Department and if available - retained for only 180 days (approx. 6 months).

Date & Time of Incident: _____ Type of Incident: _____ Date Range: _____

Address / Location: _____ Incident/Permit or Case Number: _____

Describe in as much detail as possible the record(s) requested: _____