

SOLANO COUNTY SHERIFF-CORONER'S OFFICE

Administration

PUBLIC RECORDS REQUEST FORM

Every effort will be made to process your request within 10 days of receipt. We will notify you promptly when we have determined whether or not the records you are requesting are in our possession and releasable under the law. Records will be made available upon payment of applicable fees.

NOTICE: You are not required to complete this form in order to submit a request for public records information; however, doing so will assist us in our efforts to respond to and track the progress of your request.

"Dedicated to Community Service"

Name of Requestor/Company/Agency: Stanford University Libraries		Other names used:		Today's Date: 02/22/2022	
Requestor's Address: MuckRock News DEPT MR##### 411A Highland Ave			City: Somerville	State: MA	Zip code: 02144
Phone #: 617-299-1832			Alternate phone #:		
Fax #:			E-mail address: 125307-09750522@requests.muckrock.com		
Case/Report#	CR	CAD		Other <input checked="" type="checkbox"/>	
Requested information (list case/report #, date of incident, location, and any other pertinent information): Please see next page for full request.					
Please select department of your request: <input type="checkbox"/> ANIMAL CONTROL <input type="checkbox"/> CORONER <input type="checkbox"/> DISPATCH <input checked="" type="checkbox"/> RECORDS					
Please indicate how to respond to your request: <input type="checkbox"/> Personal pick-up <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input checked="" type="checkbox"/> E-mail <input type="checkbox"/> Other _____					

***** FOR INTERNAL USE ONLY: *****

Receipt	Notification / Completion
Date request received: _____ By: _____	Date requestor notified of record availability: _____ By: _____
Assigned to: _____	Date Delayed Production Letter sent (if applicable): _____ By: _____
How was request received? <input type="checkbox"/> Walk-in <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Phone <input type="checkbox"/> E-mail <input type="checkbox"/> Other _____	Date Non-Production Letter Sent (if applicable): _____ By: _____
Payment: <input type="checkbox"/> Check# _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit/Debit <input type="checkbox"/> Virtual Terminal Amount: \$ _____ Date Received: _____ Receipt #: _____	Date completed: _____ By: _____
	Date(s) requestor notified of request completion: _____ By: _____
	Date information provided to requestor (i.e. date sent or picked up): _____ Sent / provided by: _____ How was information provided to requestor? <input type="checkbox"/> Picked up <input type="checkbox"/> Mailed <input type="checkbox"/> Faxed <input type="checkbox"/> E-mailed <input type="checkbox"/> Other _____
Notes / Comments (continue on back if necessary):	

530 Union Avenue Suite 100 Fairfield CA 94533

Phone: (707) 784-7000 / Fax: (707) 421-7027

Web: www.solanocounty.com/sheriff

Email: SHFPublicRecordRequests@SolanoCounty.com

Form PRA-1 (Rev 07/12/2017)

Dear Public Records Custodian,

This is a request for public records under the California Public Records Act (CPRA).

Under SB 978, a law passed in 2018, "each local law enforcement agency shall conspicuously post on their Internet Web sites all current standards, policies, practices, operating procedures, and education and training materials that would otherwise be available to the public if a request was made pursuant to the California Public Records Act."* I was unable to locate the Solano County Dept. of Health and Social Services Special Investigations Bureau documents on its website.

Pursuant to CPRA, I request the following records:

All current standards, policies, practices, operating procedures, and education and training materials in use by the Solano County Dept. of Health and Social Services Special Investigations Bureau

If these records are already available online, please provide me with the direct links to them. Otherwise, I would prefer these records in an electronic format.

If there are any fees for searching or copying these records, please inform me if the cost will exceed \$10. However, I would also like to request a waiver of all fees in that the disclosure of the requested information is in the public interest and will contribute significantly to the public's understanding of police practices. As the Senate Rules Committee wrote in its May 26, 2018 floor analysis**:

"Making regulations of law enforcement agencies easily accessible to the public helps educate the public about law enforcement policies, practices, and procedures, increases communication and community trust, and enhances transparency while saving costs and labor associated with responding to individual requests for this information."

This information is not being sought for commercial purposes.

The California Public Records Act requires a response within 10 business days. If access to the records I am requesting will take longer, please contact me with information about when I might expect copies or the ability to inspect the requested records.

If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information and notify me of the appeal procedures available to me under the law.

I can be reached via email at the email address listed on this request.

I appreciate your time and look forward to hearing from you soon.

Respectfully,
Stanford University Libraries

Relevant links

* https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN§ionNum=13650

** https://leginfo.legislature.ca.gov/faces/billAnalysisClient.xhtml?bill_id=201720180SB978#