

RECORDS DEPARTMENT HOURS

The South Milwaukee Police Department Records Department is open Monday through Friday from 7:00 AM to 8:00 PM. The Records Department is closed to the public on Saturdays, Sundays, and Holidays.

OBTAINING POLICE REPORTS

South Milwaukee Police Department reports may be obtained in person during business hours, or by fax at (414) 768-8067, or via the mail at the following address:

*South Milwaukee Police Department
Attn: Records
2424 15th Avenue
South Milwaukee, WI 53172*

Persons requesting reports may be asked to fill out a form detailing the particular records requested. The Records Department will then research the request and contact the requesting party when the records are available for pick-up. There is a fee of \$0.25 per page for Open Records copies.

Accident reports from August 1, 2007 to the present can also be accessed online at <http://southmilwaukee.wi.policereports.us> and can be searched using the Police Report Number, Date of Accident, or the Last Name of a Person Involved. The report is immediately displayed and available to be printed after payment is confirmed. The cost of each accident report obtained online is \$3.00.

Accident reports involving special circumstances, i.e., hit & runs, fatalities, etc..., will only have the MV-400 Wisconsin Motor Vehicle Accident Report available online and additional narratives and/or supplements may be obtained using the process above.

FEE SCHEDULE

<i>Bicycle License (Non-Expiring).....</i>	<i>\$ 6.00</i>
<i>Copies (Per Page).....</i>	<i>\$.25</i>
<i>CD/DVD Reproduction (Per CD/DVD).....</i>	<i>\$ 2.00</i>
<i>Fax Direct Notice of Satisfaction for Registration Suspension to Department of Motor Vehicles.....</i>	<i>\$ 5.00</i>
<i>Fingerprint Cards (Non-Resident Fee).....</i>	<i>\$10.00</i>
<i>Photo Reprints (Per Photo).....</i>	<i>\$.50</i>
<i>Serving of Papers.....</i>	<i>\$25.00</i>
<i>Video Tape Reproduction (Per Video Tape).....</i>	<i>\$10.00</i>

South Milwaukee Police Department

REQUEST FOR RECORDS

Under Wisconsin Open Records Law-Act 355-Laws of 1981

Requesters Name: _____ DOB: _____
 Address: _____ Phone #: _____
 City: _____ State: _____ Zip: _____
 Date Of Request: _____ Time: _____
 Request Received By: _____
 How Received: Mail: _____ In Person: _____
 How Distributed: Mail: _____ In Person: _____

Specific Records Requested (Include name and if possible date of birth of involved person(s), date and location of incident)

Request Approved: Yes: _____ No: _____ Authority: _____

If denied, reason for denial:

<< If denied: Denial can be reviewed by Writ of mandamus procedure or upon application to the District Attorney of this county, or the Attorney General of the State of Wisconsin >>

Copies requested: Yes: _____ No: _____

Cost To Register:

Pages Copied		at	\$.25 each page	=\$
Search Hours		at	\$ _____ per hour	=\$
Video			\$ 10.00 per tape	=\$ _____
DVD/CD			\$ 2.00 per disk	
Photographic Costs		at	\$.50 per photo	=\$
Mailing/Shipping				=\$ _____
Total Cost of Search				=\$ _____