

REQUEST TO INTERVIEW INVESTIGATOR

Please PRINT

Email to: FOI@wrps.on.ca or FAX to 519-650-1793 or call 519-653-8500 ext. 8262 for assistance

PART A: Person or Business Making Request

Requester			
Law Firm or Insurer/Adjuster Co.		Other parties aware of this request?	Yes No
		Joint interview discussed or possible?	Yes No
Billing Address			
Number/Unit	Street	City	Prov/Terr./State Postal/ZIP code
E-mail/Fax Number			
Contact Telephone Number:		Your Reference File #:	

PART B: Interview Information

Anticipated Length of Interview: _____ Hours (Minimum charge 1 hour, maximum 3 hours per session billed by quarter hour increments) Note: Interviews are at the sole discretion of the Service and shall be arranged during the Investigators working shift and subject to availability or last minute call out. Should circumstances require an officer to participate on overtime, call out or travel, that charge will be added on a direct fee recovery basis.	Reason for Request [NOTE: Officers cannot be interviewed if the matter is still before the Criminal or Provincial Offences Court]:
Records already obtained through (note: this is pre-condition to an approved interview): Court Order date _____ Access to Information Request Court File Name: _____ WRPS File No: _____	
Officer's Name, Badge Number and Division (if known)	Police Occurrence Number
Type of Incident	Date of Incident (YY/MM/DD)
Location of Incident	
Name of Involved Person(s) and Date(s) of Birth (if known – attach additional sheet if required)	
Which involved person(s) do you represent?	
In accordance with the <i>Municipal Freedom of Information and Protection of Privacy Act</i> ("MFIPPA"), no third party information will be released during an interview unless it has been released to you pursuant to a Court order, MFIPPA request or prior written consent is provided in advance. If the matter involves charges against a Young Person, strict limitations may exist on the information that can be provided or discussed per the <i>Youth Criminal Justice Act</i> .	
Signed this date _____, 20____	Signature of Requester _____

PART C: For Police Use Only (Booking Interview)

Interview Type Reconstruction Collision Criminal Other: _____	Officer to be interviewed
Confirmed Interview Details	Date (YY/MM/DD) Start Time
Location	Date confirmed with requestor Date confirmed with officer Supervisor Initials

PART D: For Police Use Only (Billing)

Actual Interview Date	Start Time	End Time	Overtime (if any) Travel Time (if any)
Total Time	Requester's Initials	Officer's Initials (Forward to Finance when completed)	Finance Reviewed