



# FREEDOM OF INFORMATION ACT REQUEST FORM

## 911 Call/Computer Aided Dispatch (CAD) Report Request

Incident Date: \_\_\_\_\_ Time of Call: \_\_\_\_\_  AM or  PM

Type of Call: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Incident/Case #: \_\_\_\_\_ Responding Agency(ies):  HCFR  HCPD  Aynor PD  Surfside FR  
 Briarcliffe PD  Conway FR  Conway PD  Atlantic Beach PD

Name of Requestor: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Incident Location: \_\_\_\_\_

Requestor's Phone Number:(\_\_\_\_) \_\_\_\_\_ Phone # Call Came From:(\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Desired Format:  MP3  CD  MP3  CD  
(via email only) Delivery: Mail  Pick Up   
(For CAD or CD please indicate your preference)

Signature: \_\_\_\_\_

Information Requested:  Telephone Call or  Computer Aided Dispatch Report:

Please explain if different or additional information: \_\_\_\_\_

PLEASE RETURN THE FORM TO THE HORRY COUNTY PUBLIC INFORMATION OFFICE,  
PO BOX 1236, CONWAY, SC 29528, OR 843-915-6390 (FAX) OR [BROSKYK@HORRYCOUNTY.ORG](mailto:BROSKYK@HORRYCOUNTY.ORG).

**THERE IS A \$10 CHARGE IN ADVANCE FOR ALL 911 CALLS**

Payment must be made by company check or money order (payable to Horry County Government) or exact cash!

PER SC LAW-CALLS ARE KEPT FOR 60-DAYS

Version 5.14

### FOR OFFICE USE ONLY

Request Assigned To: \_\_\_\_\_ Date Assigned: \_\_\_\_\_

Date of Response Due: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Method of Payment: \_\_\_\_\_ Date Paid: \_\_\_\_\_

HCPD Cleared By: \_\_\_\_\_ HCPD Cleared With: \_\_\_\_\_

Other Agency Cleared By: \_\_\_\_\_ Other Agency Cleared With: \_\_\_\_\_

**Please be advised that a response is due is within fifteen working days of receipt of the request.**

## 911 Call/Computer Aided Dispatch (CAD) Report Request Instructions

**INCIDENT DATE:** Please provide the date that the incident occurred.

**TIME OF CALL:** In order to be able to find your call, you must provide the **EXACT** time that the incident occurred. Be sure to note AM or PM.

**TYPE OF CALL:** Please provide the type of call (example: fire, car accident, assault, domestic, etc...)

**DATE OF REQUEST:** Please fill in the date your are filing the request.

**INCIDENT/CASE NUMBER:** If you have a copy of your incident report, please provide us with the Incident and/or Case Number.

**NAME OF REQUESTOR:** Please give us the name of the person(s) and/or business requesting the information.

**MAILING ADDRESS OF REQUESTOR, CITY, STATE, & ZIP CODE:** Please provide us with the requestor's mailing address.

**INCIDENT LOCATION:** Please provide us with the location where the incident occurred. It is important to be as specific as possible.

**TELEPHONE NUMBER CALL CAME FROM:** If you know what the telephone number the call came from was, please indicate it.

**EMAIL ADDRESS:** If you choose to receive your 911 call as an MP3 and/or if you prefer email correspondence, please indicate your email address.

**DESIRED FORMAT:** Please place a check in the box next to the format (MP3 or CD) you prefer.

**INFORMATION REQUESTED:** Please circle whether you want the Telephone Call, CAD Printout or both. The Telephone call can be provided as a MP3 (via email) or a standard CD. The CAD (Computer Aided Dispatch) is a report which shows basic information such as the date, times (time call came in, time help was dispatched, etc...) and other basic information. It is **NOT** a transcript of your call; Horry County does not provide call transcripts.

**IMPORTANT:** In compliance with South Carolina Law, Horry County maintains 911 calls for a period of 60-days only. Although Horry County answers all 911 calls, those for individual municipalities, are transferred except for Atlantic Beach Police, Anyor Police, Conway Fire/Rescue, Conway Police and Surfside Fire. Therefore, we will only be able to provide a complete call if it was for Horry County or one of the above. If your call was transferred, you will need to contact the responding agency to obtain a copy of your call.

**Incorrect or omitted information may result in a delay or our inability to locate your call.**

Please be aware that under South Carolina Law, we have 15-business days (excluding holidays and weekends) to respond to your request. This does not necessarily mean that we will have the items you have requested, only that we must send correspondence to you regarding your request. Although we cannot guarantee a specific date of completion, we will process your request as quickly as possible. Please indicate if your 911 call/CAD is for court and the date needed.