



Oklahoma Watch Center  
Information Request Form

Requesting Agency: \_\_\_\_\_.

Requestor's Name: \_\_\_\_\_.

Requestor's Title: \_\_\_\_\_.

Badge and CLEET number or corresponding Federal or Out of State Identification Number:

\_\_\_\_\_ Federal \_\_\_\_\_ Other State Agency \_\_\_\_\_

Request & Reason for Request (Please include case number & type of case):

Attach additional sheets if necessary. This is not a request for public information and requestor must be affiliated with a law enforcement or prosecuting agency having official standing and reason to request information from our databases. Any shared information is to be used for the sole purposes of furthering an official investigation or prosecution. If information is shared, signing this form acknowledges that you are expressly forbidden to share or transmit that information outside of official channels relating to such investigation or prosecution without approval from the Oklahoma Watch Center.

E-Mail form to [watchcenter@obn.ok.gov](mailto:watchcenter@obn.ok.gov)

\_\_\_\_\_ Date: \_\_\_\_\_

Signature of Requestor

\_\_\_\_\_ Date: \_\_\_\_\_

Signature of Chief Administrator (Oklahoma Watch Center Internal Use)