



# ***Cayce Department of Public Safety***

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*Inspiring Excellence*

**Byron E. Snellgrove**  
**Director**

## **FREEDOM OF INFORMATION REQUEST FOR PUBLIC RECORDS**

From: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Description of records requested (be specific): \_\_\_\_\_ Case Number (if known) \_\_\_\_\_

Please indicate the format in which you would like the Department of Public Safety to respond to your request. Please know the Department may not be able to accommodate the requested format. Cost from Fee Schedule may be applied to these formats.

Inspection Only    Hard Copy    Email    Fax    Other Format: \_\_\_\_\_

- ❖ S.C. Law provides that it is a crime to knowingly obtain or use personal information from a public body for commercial solicitation.
- ❖ Request with anticipated fees exceeding \$100.00, will required a 25% deposit before processing the request.
- ❖ Fee Schedule is attached to this request.

By my signature, I hereby state that I have reviewed information about the Department of Public Safety’s FOIA process and a copy of the Fee Schedule outlining possible charges I may incur as part of this request.

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

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

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