

SHERIFF

ORANGE COUNTY SHERIFF'S OFFICE

P. O. Box 1468 • Orange, TX 77631-1468 Orange Office (409) 883-2612 • Vidor Office (409) 769-6391 bsmith@co.orange.tx.us • www.ocsheriffsoffice.com



Richard Howard CHIEF DEPUTY

REQUEST FOR RECORDING

(All requests will be processed in the order received, and in compliance with the time limits set forth in Government Code Chapter 552, Subchapter E, and Section 1701.662, Texas Occupations Code.")

Requestor's Name:		Date Requested:		
Address:		Pl	Phone Number:	
SS#:	_DOB:	Email Address:		
Other Names/Date of Birth:				
A copy of your driver license/s	state ID is req	quired for verification purp	oses.	
Please select how you wish to	receive the m	aterials (check only one):		
Pick Up		En	Email	
FOR EACH RECORDING I	REQUESTE	D, PROVIDE THE FOLI	LOWING INFORMATION:	
Date and Approximate Time of Recording.		ic Location of Recording	Name of Person(s) Known to be Subject of Recording	
FOR OFFICE USE ONLY: # of Recordings (\$10.0) # of Full Minutes (\$1.0)	•	ling, TAC 70.13(b)(1))		
			TOTAL:	