TRAINE THE	NEW ZEALAND POLICE	
		Information Request Form
To: The Manager	From: Member of Police requesting the information	(Rank and Name) (Station)
		(District)
		(Phone) (Mobile) (Fax)
		@police.govt.nz (Email address)
Operation Name (if applicable):		
Has this request already been completed as an urgent request:		
A search warrant is required for the following, exce safety requests: Confidential Landline Subscriber Unlisted Mobile Subscriber Business Subscriber		Production Order enclosed Yes No
Approver:		
(Rank and Name - please print)		trict) (Phone) (Mobile)
No. of pages faxed:	Date:	
I,		
Signed by the said approver:		