



Washington State Patrol Identification Section
 PO Box 42633
 Olympia WA 98504-2633

SID: _____
DATE: _____ INITIALS: _____
ACTION: _____

REQUEST FOR MODIFICATION OF RECORD

Pursuant to RCW 43.43.730

NOTE: See rules and regulations printed on reverse side: DATE: _____

I, _____, Date of Birth _____, hereby
 (print name)
 acknowledge receipt this date, _____, a copy of a Washington State Patrol
 Identification Section RAP sheet bearing SID _____ consisting of ____ page(s) and
 identified as a history of criminal offenses charged to me.

I challenge the following specific portion(s) of the record (Quote current items[s]) as being
 incomplete or incorrect.

AND request modification to read (Quote):

I further request that the following designated persons or agencies who have received copies
 of the record be advised of the modifications, if such are determined to be valid.

 Name

 Name

 Street

 Street

 City State Zip

 City State Zip

 Signature of Applicant

 Name

 Street

 City State Zip

()
 Phone

Prints of right four fingers taken simultaneously. If unable to print, use left four fingers.
--

RULES AND REGULATIONS

INSPECTION BY THE SUBJECT OF THEIR RECORDS. WAC 446-16-030 (1)
Any person desiring to inspect criminal record information which refers which refers to themselves may do so at the central office of the Washington State Patrol Identification and Criminal History Section located at 3000 Pacific Avenue, Suite 202, Olympia, Washington, between the hours of 8 a.m. and 5 p.m., Monday through Friday, excepting legal holidays.

(2) Any person desiring to inspect criminal history record information pertaining to themselves shall first permit their fingerprints to be taken by the Section for identification purposes if requested to do so. The Section, in their discretion, may accept other identification in lieu of fingerprints.

(3) A reasonable period of time, not to exceed thirty minutes, shall be allowed each individual to examine criminal history record information pertaining to themselves.

(4) No person shall be allowed to retain or reproduce any criminal history record information pertaining to themselves except for the purpose of challenge or correction of entries of arrests by submitting law enforcement agencies of the state of Washington. Visual examination only shall be permitted of such information unless the individual asserts their belief that criminal history record information from a submitting law enforcement agency of the state Washington concerning them is inaccurate, incomplete or maintained in violation of the law; and unless they request correction or completion of the information on a form furnished by the Section, or requests expungement pursuant to WAC 446-16-025.

(5) If any person who desires to examine criminal history record information pertaining to themselves is unable to read or is otherwise unable to examine same because of a physical disability, they may designate another person of their own choice to assist them. The person about whom the information pertains shall execute, with their mark, a form provided by the Section consenting to the inspection of criminal history record information pertaining to themselves by another person for the purpose of it being read or otherwise described to them. Such designated person shall then be permitted to read or otherwise describe or translate the criminal history record information to the person about who it pertains.