



Washington State Patrol **Criminal History Records** 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  
Criminal History Records Section RAPsheet 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

---

---

### **WAC 446-20-090**

Inspection of record by the subject of record.

(1) Any person desiring to inspect his or her criminal history record information or request a copy of his or her nonconviction data for a reasonable fee may do so at the central records keeping office of any criminal justice agency or at the Washington state patrol identification and criminal history section, during normal business hours, Monday through Friday, excepting legal holidays.

(2) Any person desiring to inspect his or her criminal history record information or request a copy of his or her nonconviction data for a reasonable fee must first permit his or her fingerprints to be taken by the criminal justice agency for identification purposes, if requested to do so. The criminal justice agency in its discretion may accept other identification in lieu of fingerprints.

(3) A reasonable period of time, not to exceed thirty minutes, will be allowed each individual to visually examine criminal history record information pertaining to himself or herself.

(4) If any person who desires to examine his or her criminal history record information is unable to read or is otherwise unable to examine same because of a physical disability, he or she may designate another person of their own choice to assist him or her. The person about whom the information pertains must execute, with his or her mark, a form provided by the criminal justice agency consenting to the inspection of criminal history information pertaining to himself or herself by another person for the purpose of it being read or otherwise described to him or her. Such designated person will then be permitted to read or otherwise describe or translate the criminal history record information to the person about whom it pertains.

(5) Each criminal justice agency will develop procedures to ensure that no individual improperly retains or mechanically reproduces nonconviction data during the process of inspection.

[Statutory Authority: Chapters [10.97](#) and [43.43](#) RCW. 12-17-114, § 446-20-090, filed 8/21/12, effective 9/21/12; 10-01-109, § 446-20-090, filed 12/17/09, effective 1/17/10; 97-05-048, § 446-20-090, filed 2/18/97, effective 3/21/97. Statutory Authority: RCW [10.97.080](#) and [10.97.090](#). 80-08-057 (Order 80-2), § 446-20-090, filed 7/1/80.]