



Bois Forte Tribal Court

12907 PALMQUIST ROAD, SUITE B
ORR, MN 55771
PHONE: 218-757-3462 | FAX: 218-757-0064

REQUEST FOR TRIBAL COURT RECORDS INSTRUCTIONS

What records are considered court records?

“Court records” may include any document, information, exhibit, or other documents maintained by a court in connection with a court hearing proceeding. Some examples of court records may be a case summary, court order, civil judgement, petitions, criminal history, or audio/video hearing proceedings.

What kinds of records are not available to the public?

Some records are only available to the parties and may not be disclosed to the general public. Records unavailable to the general public include:

- Adoption records
- Youth /Juvenile records
- Elder and vulnerable adult/ guardianship records
- Protection and harassment orders
- Paternity records
- Youth guardianship
- HIPPA and personal information records such as but not limited to Rule 25/Comprehensive Evaluation results, treatment progress notes, mental health assessments and progress notes etc.
- Police records – these must be requested through the Bois Forte Police Department

How can I request my records?

- Step 1: complete a Tribal Court Records Request Form. The form can be found on Boisforte.com under the Judicial Services Tab under “court forms” or contact Court Clerk for a copy 218-757-3462
- Step 2: return the Tribal Court Records Request Form to the court clerk at the Court Building during filling hours or by email to bfcourt@boisforte-nsn.gov or via fax 218-757-0064

How long will it take?

Filing fees are due when record request is filed. Not submitting your payment at time of request can delay the request. All requests will require up to a minimum of 7 days to complete. We will call or email you when the documents are ready.

How much does it cost?

Copy fees are due when record request is filed. Requests will not be processed until payment is made.

CERTIFIED COPY	\$10.00/PER RECORD REQUEST
RECORDINGS/TRANSCRIPTS	\$100.00
MAILING FEE	\$5.00 flat rate for any documents requested to be mailed.

Payments accepted: Cash (exact change only) or money order accepted. Sorry no checks or credit cards accepted.

If you cannot afford the fee, you may complete a fee waiver application and submit to the Courts.

Where do I submit my records request form?

Return the Tribal Court Records Request Form to

-The Court Clerk at the Court Building during filling hours Monday- Friday 8:00am-3:30pm

-Email to bfcourt@boisforte-nsn.gov

-Fax 218-757-0064



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Copy Fees:

Copy fees are due when record request is filed. Requests will not be processed until payment is made. All requests will require at least a minimum of 7 days to complete. We will call or email you when the documents are ready. FEE Waiver application is available to those that are within federal poverty guidelines and/or receiving financial assistance benefits.

Send completed request form to bfcourt@boisforte-nsn.gov or Fax to Tribal Court Clerk at 218-757-0064 or you may drop off in person at the court building during filling hours Monday- Friday 8:00am- 3:30pm

CERTIFIED COPY	\$10.00/PER RECORD REQUEST
RECORDINGS/TRANSCRIPTS	\$100.00
MAILING FEE	\$5.00 flat rate for any documents requested to be mailed.

Print clearly and fill in all sections, your request may not be processed otherwise

1. **REQUESTED BY:** FULL NAME (First, MI, Last, Suffix): _____

RELATIONSHIP/CONNECTION TO THIS CASE _____

ADDRESS: _____

PHONE: _____ EMAIL ADDRESS: _____

2. **CASE INFORMATION:** Case Type: ___ CIVIL ___ CRIMINAL ___ PROBATE ___ JUVENILE ___ CHIPS ___ OTHER _____

COURT CASE FILE NUMBER(S): _____

DATE(S) OF COURT CASE OR INCIDENT: _____

NAME OF DEFENDANT/RESPONDENT:

(First, MI, Last, Suffix): _____ DOB: _____

NAME OF PLAINTIFF/PETITIONER:

(First, MI, Last, Suffix): _____ DOB: _____

3. **SPECIFY REQUEST DETAILS:** REASON FOR REQUEST: _____

SPECIFY DOCUMENTS REQUESTING: check one

Copy of court order for: _____

Copy of court transcript/recording of hearing- List Dates of Hearing(s): _____

Other Please describe: _____

NUMBER OF COPIES REQUESTING: _____

4. **DOCUMENTS DELIVERY METHOD-** Check one.

MAIL TO: NAME- _____

ADDRESS- _____

PICK UP AT COURT BUILDING BY WHO: _____

EMAIL TO: Email address- _____

Requester's Signature _____

Date of Request _____

COURT USE ONLY

Records picked up print name: _____

Pick up Signature: _____

Date of Pick up: _____

Request received on: _____ ALPHA NO. _____

Estimated Cost of Request: _____

Payment Received: Y N CASH or MONEY ORDER

Payment Waiver Application Received: Y N N/A

Payment Waived: Y N N/A

Initials of Court Staff Completing: _____

Records Request Completed on: _____