SANTA CLARA POLICE
REQUEST FOR RECORD INFORMATION

Main: 408-615-4700
Fax: 408-248-0276

601 El Camino Real
Santa Clara CA 95050

Report/Case #
or Incident #

INCIDENT INFORMATION

1 Type of Report (check one):

- ◉ Traffic Collision Report
- ○ Crime Report
- ○ Other
- ○ Domestic Violence
- ○ Arrest Report
- ○ A juvenile is involved (refer to Juvenile Court)

2 I am requesting the following:

- ○ Copy of Report
- ○ Calls for Service
- ○ Photos

3 Report Information

Date/Time Reported: _____

Location of Occurrence: _____

Suspect/Driver Name: _____

Victim/Driver Name: _____

Circumstances: _____

_____

_____

_____

REQUESTOR CONTACT INFORMATION

4 I am the (check one):

- ○ Victim
- ○ Property Owner
- ○ Attorney
- ○ Suspect
- ○ Insurance Rep.
- ○ Other:_____

Name: _____

Company Name: _____

Address: _____

City, State, & Zip Code: _____

Home Phone #: _____

Cell Phone #: _____

* Reports are released in accordance with Government Code 6254. The Santa Clara Police Department may take up to **10 days** to respond to this request, but will strive to release reports as soon as possible.
* Reports involving juveniles are released under statutes governed by the Santa Clara County Juvenile Court (T.N.G. vs. Superior Court 4 Cal.3d 767) and may take longer than 10 days to be released.
* Report Release Hours: Monday-Friday 8:00 a.m. to 5:00 p.m.
* Report cost: 20¢ per page. Photographs or information on CD/DVD: $3 per CD/DVD

X _____ _____

Signature **Date of Request**

RECORDS USE ONLY

Received	Reviewed By/Date	Released
By: _____	Approved: _____	By: _____
Date: _____	Denied: _____	Date: _____
Notes:	PRA Letter: _____	# of Pages: _____ Cost: $_____