



UC Irvine Police Department

Application for Copy of Police Report

An approved report for release will require review of a valid government issued photo ID and collection of the duplication and processing fee of \$5.00.

Processing of this request may take up to 10 calendar days.

Full Name (Last, First, Middle)		Date of Birth
Address	City	Zip
Telephone Number	E-Mail Address	
Date and Time of Incident	Type of Report (Select One)	
	<input type="checkbox"/> Traffic Accident <input type="checkbox"/> Crime <input type="checkbox"/> Incident <input type="checkbox"/> Other	
Report Number	Location of Reporting Incident	

Reason for Report Request

Please Select
<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Victim <input type="checkbox"/> Arrestee <input type="checkbox"/> Other (Specify):

Certification
 I declare under the penalty of perjury that I am the party of interest identified in the report recorded hereon.

Signature	Date

FOR DEPARTMENT USE ONLY
(Personnel to Check Applicable Boxes and Complete Required Information)

<input type="checkbox"/> Review Photo I.D. <input type="checkbox"/> Print Type and I.D. Number: _____ <input type="checkbox"/> Collect \$5.00 fee Transaction completed by: _____
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PAYMENT METHOD (Checks are made payable to 'UC Regents')

<input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Credit Card: VISA/MasterCard/AMEX <input type="checkbox"/> Check#: _____	<input type="checkbox"/> Request Denied <input type="checkbox"/> Notarized Letter
Prepared by: _____	Date: _____