



Ukiah Police Department
Safety, Professionalism, Community Service

Chris Dewey
Chief of Police

Report Request

- 1) If this request is for your Insurance Agency, please instruct your Agent to request the report by mail or fax to the above address.
- 2) If the request involves a juvenile criminal matter, the report may be forwarded to the Mendocino County Juvenile Court for review and approval. (T.N.G. vs. Superior Court 4 Cal.3d 767). The Court requires that you provide a detailed explanation of your need for the report by completing a "Petition to Obtain Report of Law Enforcement Agency/Juvenile" (JV-575).
- 3) If you are listed as the arrested person in the report, you may contact the Mendocino Superior Court, 100 N. State Street, Ukiah CA 95482 to request a copy of the report
- 4) Government Code Section 6254(f) identifies certain information that must be made available to victims of specified crimes unless release of the information would endanger the safety of a person or the successful completion of an investigation.
- 5) **IDENTIFICATION VERIFICATION IS REQUIRED FOR ALL REQUESTS.** You must present a valid Driver's License or Photo Identification.
- 6) This agency has ten (10) days to respond to your request.

DATE OF REQUEST: _____

TYPE OF INCIDENT: TRAFFIC ACCIDENT BURGLARY/THEFT AUTO THEFT ASSAULT OTHER: _____

RELATIONSHIP TO THE INCIDENT/REPORT: VICTIM INVOLVED OTHER _____

REASON REPORT IS NEEDED: _____

REPORT NUMBER (IF KNOWN) _____

IF REPORT NUMBER IS NOT KNOW, THE FOLLOWING MUST BE COMPLETED:

DATE/TIME OF OCCURRENCE/INCIDENT: _____

STREET NAME/ADDRESS OF OCCURRENCE/INCIDENT: _____

VEHICLE LICENSE PLATE/DESCRIPTION OF VEHICLE (IF APPLICABLE): _____

NAME(S) OF PARTIES INVOLVED: _____

ADDITIONAL INFORMATION THAT MAY BE HELPFUL: _____

THE FOLLOWING PERSONAL INFORMATION MUST BE COMPLETED:

FIRST NAME: _____ LAST NAME: _____ DOB: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: _____ BUSINESS NAME IF APPLICABLE: _____

* _____ *

SIGNATURE OF REQUESTING PARTY

FOR INTERNAL USE ONLY

DATE RECEIVED: _____ PROCESSED BY: _____

DATE RELEASED: _____ DATE DENIED: _____