



ARIZONA DEPARTMENT OF PUBLIC SAFETY
REQUEST FOR COPY OF ACCIDENT REPORT

DEPARTMENT RECORDS SECTION

Physical Address: 2222 West Encanto Boulevard
 Phoenix, Arizona 85009
 Mailing Address: P.O. Box 6638, Mail Drop 3111
 Phoenix, Arizona 85005-6638

GENERAL INFORMATION
 Please call the Department Records Section at (602) 223-2230 for report availability and number of pages each report contains (see pricing below).

PLEASE PROVIDE THE FOLLOWING INFORMATION: *(Print legibly to expedite processing)*

I am requesting:

- Report Only** (\$9 fee for first 9 pages, \$0.10 for each additional page)
- Photo Contact Sheets** (\$10 Each)
- 8 X 10 Photo** (\$4 Each) _____ no. of each
- Photo CD's/DVD's** (if available) (\$15 each)
- E-Mail** (\$9 up to 5 megabytes)
- Fax** (\$9 - Maximum 20 pages)
- Report CD** (\$10 up to 700 megabytes)

| | | | | | |
|-----------------------------|-----------------------|---------------|---------------|-----------------------|-----------------|
| TODAY'S DATE | REPORT NO. (if known) | DATE OF EVENT | TIME OF EVENT | HIGHWAY NAME | MILEPOST NUMBER |
| SUBJECT NAME (Last) (First) | | M.I. | DATE OF BIRTH | INVESTIGATING OFFICER | |
| REQUESTER'S NAME | | | COMPANY NAME | | |
| ADDRESS | | | | | |
| CITY | | | STATE | ZIP | CONTACT PHONE |
| FAX NUMBER | | EMAIL ADDRESS | | | |

SUMMARY OF ARS §28-667

Arizona Revised Statute §28-667 prohibits examining or receiving copies of accident reports for commercial solicitation.

I certify that I am not requesting records for a commercial purpose per ARS §28-667.

SIGNATURE

X _____

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|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| *DPS USE ONLY* | REQUEST COMPLETED / RELEASED | *DPS USE ONLY* |
| PAYMENT RECEIVED <input type="checkbox"/> Cash <input type="checkbox"/> Check AMT. PAID \$ | <input type="checkbox"/> MAILED <input type="checkbox"/> PENDING <input type="checkbox"/> PLACED AT PICK-UP WINDOW <input checked="" type="checkbox"/> (RECEIVED BY SIGNATURE) | I.D. NO. DATE RELEASED |