



Wentzville Police Department

REQUEST FOR COPY OF REPORT

Date of Request: \_\_\_\_\_

Name of Person making request: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

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Report Number: \_\_\_\_\_

Individual's name involved in incident: \_\_\_\_\_

Type of Incident: \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Choose one of the following:

\_\_\_ Involved in the incident \_\_\_ Insurer of person involved in incident

\_\_\_ Attorney of person involved in incident \_\_\_ Other, explain: \_\_\_\_\_

Reason for request: \_\_\_\_\_

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There will be a \$5.00 fee for each report requested. Cash or money order payable to the City of Wentzville.

Some requests will involve extensive and lengthy searches of police records. State Statute allows for a reasonable length of time to allow the information to be gathered.

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Office use only

Driver's license/other identification \_\_\_\_\_

Date sent/issued: \_\_\_\_\_