



# Report Request

# Form D

**PERSON INVOLVED IN THE INCIDENT**

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth (YYYY-MM-DD): \_\_\_\_\_ Telephone Number(s): \_\_\_\_\_

Current Address (Unit/Number, Street, City, Postal Code): \_\_\_\_\_

**Details of Person Applying for Report** (if different from above require consent / ID from involved person)

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth (YYYY-MM-DD): \_\_\_\_\_

Contact Telephone Number(s): \_\_\_\_\_

Signature: \_\_\_\_\_ Date (YYYY-MM-DD): \_\_\_\_\_

**Report Receipt Options** (You may only choose one option)

To be emailed (Provide email address below)      To be mailed out

Email: \_\_\_\_\_

**Request for Motor Vehicle Collision (MVC) Report** (we do not release reports completed at Collision Reporting Center)

Report Number: \_\_\_\_\_ Incident Date (YYYY-MM-DD): \_\_\_\_\_ Time (AM/PM): \_\_\_\_\_

Location of Collision: \_\_\_\_\_

Vehicle Plate: \_\_\_\_\_ Officer's Name and Badge (If known): \_\_\_\_\_

Your Involvement:

Driver      Passenger      Pedestrian      Property Owner      Other (Please specify): \_\_\_\_\_

**Request for Occurrence Report**

Report Number: \_\_\_\_\_ Incident Date (YYYY-MM-DD): \_\_\_\_\_

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

Officer's Name and Badge (If known): \_\_\_\_\_

**Incident Type** (Select one of the areas below)

Assault	Fire	Lost/Stolen Identification	Lost/Stolen Plates
Break and Enter	Theft	Neighbour Dispute	Fraud/Identity Theft/Cyber Crime
Domestic	Mischief	Landlord/Tenant Dispute	

Other (Please specify): \_\_\_\_\_

**NOTE**

- 3<sup>rd</sup> party information is redacted from police reports
- Payment must be received prior to processing
- Please allow for up to 25 business days (processing times may vary)

**THIS PORTION TO BE COMPLETED BY PEEL REGIONAL POLICE PERSONNEL**

Identification Produced: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Payment Amount: \_\_\_\_\_ Initials and Badge #: \_\_\_\_\_

PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED PURSUANT TO THE MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT AND WILL BE USED FOR THE PURPOSE OF RESPONDING TO YOUR REQUEST. QUESTIONS ABOUT THIS COLLECTION SHOULD BE DIRECTED TO THE CUSTOMER SERVICE UNIT.