

Records Requests

1425 Dowell Drive, Ventura, CA 93003-7361
805-339-4417

APPLICATION FOR POLICE RECORD INFORMATION

PLEASE PRINT USING BLUE OR BLACK INK. Please include a copy of valid photo ID (driver license, identification card, passport, or Matricula Consular card) and payment if applicable. Police personnel have the right to refuse access to records if the requestor does not satisfactorily establish his/her identity and his/her right to access such records.

Name of Requestor (first, middle, last) & Business Name (if applicable):
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Name of Person Involved (first, middle, last), if different than requestor :

Driver License / Identification Number:	State:	Date of Birth:
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Mailing Address, City, State, Zip Code:

Phone Number:	Email:
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Request Type	Report Number(s), if applicable:														
<table style="width:100%"> <tr> <td style="width:25%;"><input type="checkbox"/> Traffic Collision</td> <td style="width:10%;">\$20</td> </tr> <tr> <td><input type="checkbox"/> Crime Report</td> <td>\$20</td> </tr> <tr> <td><input type="checkbox"/> Calls for Service*</td> <td>Free</td> </tr> <tr> <td><input type="checkbox"/> Public Arrest Info</td> <td>Free</td> </tr> <tr> <td><input type="checkbox"/> Clearance Letter</td> <td>\$44</td> </tr> <tr> <td><input type="checkbox"/> Notarized</td> <td>\$65</td> </tr> <tr> <td><input type="checkbox"/> Other (specify in Comments below)</td> <td>Fees vary</td> </tr> </table>	<input type="checkbox"/> Traffic Collision	\$20	<input type="checkbox"/> Crime Report	\$20	<input type="checkbox"/> Calls for Service*	Free	<input type="checkbox"/> Public Arrest Info	Free	<input type="checkbox"/> Clearance Letter	\$44	<input type="checkbox"/> Notarized	\$65	<input type="checkbox"/> Other (specify in Comments below)	Fees vary	Date/Time of Incident/Calls:
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<input type="checkbox"/> Clearance Letter	\$44														
<input type="checkbox"/> Notarized	\$65														
<input type="checkbox"/> Other (specify in Comments below)	Fees vary														
	Location of Incident/Calls:														

Comments

*If requesting **Calls for Service**, use the Date/Time & Location fields above to specify the date(s) and location for which you would like to receive information. Use one form per location.

Under PENALTY OF PERJURY as provided in California Penal Code Section 118, I declare that I AM, or REPRESENT with the required credentials & Letter of Authorization, the party of interest identified below (check one):

- Person Involved (Victim, Insured, Driver, Passenger, etc.)
- Parent/Legal Guardian of Juvenile Involved
- Registered / Legal / Property Owner
- Other (specify in detail): _____

Requestor Signature:	Date:
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VPD USE ONLY

Disposition of Request:	Remarks:	Fulfilled by:
		Date: