

# REQUEST FOR ACCIDENT REPORT

**Please read Carefully**

Effective September 1, 1995, Texas Law limits access to accident reports.

The following information will assist this agency in validating one's right to access and in determining the appropriate fee for the report. The request will become an official record.

**Printed Name:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Charge Information: Please initial one of the following**

\_\_\_\_\_ I am a party involved in the Accident (No Charge)

\_\_\_\_\_ I represent a Court or Law Enforcement Agency having an interest in the Accident (No Charge)

\_\_\_\_\_ I am not a party involved in the Accident - \$6.00 FEE

**Accident Information:**

State Law provides that a person not a party to the accident must be able to provide two or more of the following to be eligible to receive a copy of the Accident Report.

**Date of Accident:** \_\_\_\_\_

**Location of Accident:** \_\_\_\_\_

**Name of Party Involved:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Requestor**

\_\_\_\_\_  
**Date of Request**