

Alameda Police Department, 1555 Oak St, Alameda, CA 94501 RECORDS Unit (510) 337-8411 FAX (510) 522-9291

APPLICATION FOR RELEASE OF INFORMATION

PER GOVERNMENT CODE SECTION 6253—REQUEST COULD TAKE 10 DAYS

Type of Report:	Report/ IC Number:
\square Traffic Collision \square Crime \square Other	
INFORMATION REQUESTED BY:	DATE REQUESTED:
Name	CERTIFICATION:
Address:	I declare under the penalty of perjury that I am /I represent:
Phone Number	(Person named in report)
(Home)	SIGNED:
(Work)	
Reason for Request:	
PARTY OF INTEREST (Please Check One)	PARTY OF INTEREST (Please Check One)
Person Involved: Driver, Passenger, Pedestrian, or Victim	Representative of Insurance Company or Insurance Adjusting Agency
Property Owner (Restricted release)	Name of Company
Authorized Individual (Signed Authorization/Copy of ID Required)	Attorney: Name of Firm:
Parent / Guardian of Juvenile Party	Other Party of Interest (Specify)
IF REPORT NUMBER IS NOT KNOWN, PLEASE COMPLETE:	
Date and Time of Occurrence: Locat	
Name of Person on the Report:	
Vehicle License Plate / Vehicle ID Number (VIN):	
Officer's Name or Badge Number:	
FOR DEPARTMENTAL USE ONLY	Receipt No
Approved By: Denied By:	Released By:
Date Sold: Amount:	Cash Check Credit Card
REMARKS:	
CONFIDENTIAL INFORMATION HAS BEEN REMOVED IN ACCORDANCE WITH SECTION 6254(F) OF THE CALIFORNIA GVT. CODE /	
PUBLIC RECORDS ACT OR THE TNG ORDER OF THE ALAMEDA COUNTY SUPERIOR COURT / JUVENILE DIVISION. APD Records Request Rev. 02/2018	