REQUEST FOR INFORMATION

Print form and complete. Report fee: $0.35/page payable to the *City of Woodland*.
Submit application & fee via mail or in person:

WOODLAND POLICE DEPARTMENT

1000 LINCOLN AVENUE, WOODLAND, CA 95695
Phone: 530.661.7800; Fax: 530.662.5377
web: http://www.woodlandpolice.org; email: wpd@cityofwoodland.org

It is the policy of the Woodland Police Department to provide you with all the information to which you are entitled under state and federal laws. Your request will be processed within 10 business days or less. Service charges for report requests: $0.35/page. Payment may be made in the form of cash or check (if requesting by mail).

Date & Time of Incident: _____ Report/Incident #: _____

Type of Incident: ( ) Accident ( ) Crime

( ) Other _____

Was anyone arrested? ( ) Yes ( ) No

If you are the arrestee in this case, you may need to make your request directly with the Yolo County DA's office.

Name of Party(ies) involved in incident: _____

_____

Party of Interest (Please check one)

( ) Person Involved

( ) Property Owner

( ) Attorney

( ) Representative of Insurance Company or Insurance Adjusting Agency

( ) Parent/Guardian of Juvenile

( ) Authorized Individual (Signed authorization is required)

( ) Other (please specify): _____

Name of Applicant: _____

Applicant Phone Number* Home: _____ Work: _____ Cell: _____

**By providing your name and telephone number you will assist the Woodland Police Department should we need to recontact you regarding your request.*

RECORDS INFORMATION

( ) Unable to locate Report

( ) Unable to release record as requested: _____

( ) Record authorized to be released by: _____

Request processed by: _____ CAD# _____ Date: _____

Received by: _____ Date: _____