

SANTA BARBARA AIRPORT POLICE
Request For Report

PLEASE PRINT:

Case #:

If case number is unknown, provide the following:

Name (if other than requestor):

Date/Time of Incident:

Location of Incident:

Requestor

Agency:

I DECLARE UNDER PENALTY OF PERJURY (PENAL CODE SECTION 118) THAT:

I REPRESENT THE PARTY OF INTEREST (A Signed Waiver is Required)

I AM THE PARTY OF INTEREST INDICATED BELOW:

TRAFFIC OR AIRCRAFT ACCIDENT:

Driver

Pilot

Attorney for Driver or Pilot

Injured Party

Attorney of Victim

Insurance Agent

Owner of Vehicle

Owner of Aircraft

Owner of Damaged Property

Representative of Law Enforcement Agency

Parent of Juvenile Driver or Victim

CRIME/INCIDENT:

Victim

Parent/Guardian of Victim

Insurance Agent

Attorney of Victim

Representative of Law Enforcement Agency

Signature: _____

Date: _____

The signatory takes full responsibility of the information received and will incur all penalties for dissemination of the report/information received to any unauthorized person or persons

AIRPORT PERSONNEL HAVE THE RIGHT TO REFUSE ACCESS TO RECORDS IF THE REQUESTOR DOES NOT SATISFACTORILY ESTABLISH THEIR IDENTITY AND/OR THE RIGHT TO ACCESS SUCH RECORDS [Govt. Code Sec. 6254(f)]

OFFICIAL USE ONLY:

Report Released by: _____