



FRESNO STATE POLICE DEPARTMENT

2311 E Barstow Ave, M/S PO14 (559) 278-8400
 Fresno, CA 93740 (559) 278-7788 (fax)

APPLICATION FOR RECORDS/REPORT RELEASE

DISCLOSURE: Pursuant to the California Public Records Act, 6253(c), Each agency, upon a request for a copy of records, shall, within 10 days from receipt of the request, determine whether the request, in whole or in part, seeks copies of disclosable public records in the possession of the agency and shall promptly notify the person making the request of the determination and the reasons therefor. Notification will be made by phone and/or email. Fresno State Police Department will notify requestors by email if requests require additional processing time.

RECORDS/REPORT INFORMATION					
TODAY'S DATE	CASE NUMBER	DATE OF INCIDENT	CASE TYPE		
			<input type="checkbox"/> CRIME	<input type="checkbox"/> TRAFFIC COLLISION	
REASON FOR REQUEST			<input type="checkbox"/> OTHER	<input type="checkbox"/> PROPERTY REPORT	
REQUESTOR INFORMATION			COMPANY/AGENT		
FIRST	LAST		COMPANY/AGENCY NAME		
MAILING ADDRESS			FIRST	LAST	
CITY	STATE	ZIP	MAILING ADDRESS		
DATE OF BIRTH	CDL		CITY	STATE	ZIP
EMAIL			EMAIL		
PHONE			PHONE		
OR					
PARTY OF INTEREST (CHECK ONE)					
<input type="checkbox"/> PERSON INVOLVED Victim, Driver, Passenger, Pedestrian			<input type="checkbox"/> AUTHORIZED REPRESENTATIVE OF VICTIM		
<input type="checkbox"/> ATTORNEY			<input type="checkbox"/> REPRESENTATIVE OF INSURANCE COMPANY		
<input type="checkbox"/> PARENT/GUARDIAN OF JUVENILE			<input type="checkbox"/> OTHER _____		
I DECLARE UNDER THE PENALTY OF PERJURY, THAT I AM, OR THAT I REPRESENT THE PARTY OF INTEREST IDENTIFIED IN THE REPORT RECORDED HERON.					
SIGNATURE				DATE	

DEPARTMENT USE ONLY				
DATE RECEIVED	DATE PROCESSED	REASON FOR DENIAL		NOTIFICATION
		<input type="checkbox"/> NO FEE	<input type="checkbox"/> AVAILABLE AT TRIAL	<input type="checkbox"/> EMAIL
RECEIVED BY	<input type="checkbox"/> APPROVED	<input type="checkbox"/> GC 6254(F)	<input type="checkbox"/> COPY NOT PICKED UP	<input type="checkbox"/> PHONE
	<input type="checkbox"/> DENIED	<input type="checkbox"/> NOT FSPD CASE	<input type="checkbox"/> OPEN CASE	<input type="checkbox"/> MAIL