



Information on this form will assist the South Tucson Police Department in providing the public records you are requesting. You must provide sufficient information to specifically identify records, such as case number, incident location and/or date of occurrence. Under Arizona law, some information not subject to release may be removed from records prior to release.

You may choose to leave your request and have the report mailed to you. Please ensure that the address and the phone portion of this request are completed. You will be required to pay in advance for the report plus postage.

Name of Requestor _____ Date _____

Address: _____ (STREET) _____ (CITY / STATE) _____ (ZIP) Phone _____

These documents will be used for:
 Personal, non-commercial use. I am aware of the penalties for conversion to commercial use.
 Commercial use. I certify that these documents will be used for: _____

To Obtain Police Reports and/or Collisions - \$5.00 per report
 (Additional .25¢ per page if over 15 pages)

STPD Case Number: _____
 (10-DIGIT NUMBER)

If case number is not known, please complete the fields below:

Date of Incident: _____ Location: _____

Type of Incident: _____
 (ASSAULT, ACCIDENT, CRIMINAL DAMAGE, BURGLARY, ETC.)

Names of person(s) involved: _____

Additional Information: _____

To Obtain Visa/Arrest/Clearance Letters - \$5.00 (Cost for 3 copies of notarized or non-notarized letter)
 Please complete this section for obtaining a Visa/Arrest/Clearance Letter ONLY. Government Issued ID must be provided at the time of request. If no Government Issued ID is available, a birth certificate or baptismal certificate will be accepted.

Name: _____ Date of Birth: _____
 (PLEASE PRINT) (LAST) (FIRST) (MM/DD/YYYY)

Former/Maiden/Alias Names: _____

** Social Security Number: _____ Driver's License No.: _____ State: _____

 (SIGNATURE OF REQUESTING PARTY)

-Provision of your Social Security Number is to ensure accuracy in checking your criminal history information. You may choose not to provide this information, however, that may hinder the ability to provide accurate information.

OFFICE-USE ONLY

TIME REQUEST RECEIVED: _____ TIME REQUEST COMPLETED: _____

INFORMATION RELEASED: _____

REDACTIONS: STANDARD _____ Other _____ N/ _____ C/ _____

PROCESSED BY: _____ O/ _____ U/ _____