

PLYMOUTH TOWNSHIP POLICE DEPARTMENT

Request for Police Report

Type of Report: Accident _____ Incident _____

Date of Occurrence: _____ **Incident #:** _____

Location of Accident/Incident: _____

Name of Person (s) involved: _____

Name of person requesting: _____ **Phone #:** _____

Will report be: picked up: _____ mailed: _____

Mailing address: _____

THERE IS A \$15 CHARGE FOR ALL ACCIDENT REPORTS. ALL OTHER REPORTS ARE \$20 PAYABLE AT TIME OF REQUEST. YOU MUST ATTACH A CHECK OR MONEY ORDER OR YOUR REQUEST WILL NOT BE PROCESSED.