



CITY OF MORGAN HILL POLICE DEPARTMENT

16200 Vineyard Blvd., Morgan Hill, CA 95037

(408)776-7300

APPLICATION FOR RELEASE OF INFORMATION

Government Code § 7920.000 – 7923.600 limits those who are eligible to receive copies of police reports or other police records. Please complete this application and submit it to our records department. We will process your request within ten business days of the officer completing the report or receipt of your application, whichever is greater, however we will make every effort to complete your request as soon as possible. We will contact you when the report has been prepared for you. The fee for police records is \$ 17.00 for the first 5 pages and \$0.11 each additional page.

You may return this form via email to Records@morganhill.ca.gov, in person, by fax to 408-776-7328, or by mail. You must also provide a legible copy of your photo ID.

TODAY'S DATE:	TYPE OF REPORT: ____ TRAFFIC COLLISION -or- CRIME TYPE:_____	INCIDENT NUMBER:
EXACT LOCATION OR ADDRESS OF INCIDENT:		DATE AND TIME OF INCIDENT:
NAME OF APPLICANT:	NAME OF DRIVER / PROPERTY OWNER / VICTIM:	
APPLICANT EMAIL ADDRESS:		
APPLICANT ADDRESS:	PHONE NUMBER:	DRIVER LICENSE NUMBER OR I.D. NUMBER:
APPLICANT'S INVOLVEMENT OR INTEREST IN THE REPORT:		
<p>I declare under penalty of perjury that: <input type="checkbox"/> I AM <input type="checkbox"/> I REPRESENT the Party-of-Interest identified in the report requested above.</p>		
SIGNATURE:_____		
<p><u>FOR OFFICE USE ONLY</u></p> <p>Notes:</p>		
<p>DATE:_____ FEES COLLECTED: \$_____ BY:_____ ID checked? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>		