**SANTA BARBARA COUNTY SHERIFF’S OFFICE REQUEST FOR INFORMATION OR RECORDS**

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| Information Requested: | | | | | Crime Report | | | Citation | | | | Accident Report | | | |
| Other: | | | | | | | | | | | | | | | |
| Report Number: | | |  | | | | | | Date of Incident: | | | |  | | |
| Location: |  | | | | | | | | | | | | | | |
| Name of involved person: | | | | | |  | | | | | | | | | |
| Reason for requesting information: | | | | | | |  | | | | | | | | |
| Party of interest (Please check one)  Victim  Law Enforcement Agency Insurance Company  Property Owner  Driver/Passenger  Peace Officer  Attorney  Parent/ Guardian of juvenile  Reporting Party  Other: | | | | | | | | | | | | | | | |
| **CERTIFICATION:** I declare under penalty of perjury that  I am  I represent the party of interest identified in the report recorded hereon. | | | | | | | | | | | | | | | |
| **REQUESTED BY:**  Date: | | | | | | | | | | | | | | | |
| Signature: | |  | | | | | | | | Phone Number: | | | | | |
| Report Picked up by: | | | |  | | | | | | | Date: | | | | |
|  | | | | | | | | | | | | | | | |
| **RECORDS USE ONLY** | | | | | | | | | | | | | | **BODY #:** |  |
| Denied:  Arrest reports released by District Attorney  Probation Officer who has jurisdiction over case  Case still under investigation  Case is Protected Information  Other:  Date: | | | | | | | | | | | | | | | |
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| Approved by:  Title:  Date: | | | | | | | | | | | | | | | |
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