

City of Big Sandy Police Department

Accident Report Request Form

1. Date and Time of Accident (if known): _____
2. Location of Accident (if known): _____
3. Incident Case Number (if known): _____

Accident reports cost \$10, which should be paid at city hall. The Big Sandy Police Department must obtain the following information in order to determine if you are entitled to a full and complete accident report in accordance with Texas Transportation Code §550.065(c)(4), effective 6/18/2015.

Persons or entities not listed under §550.065(c)(4) may only receive a crash report with redactions made in accordance with §550.065(f)(2).

Please select which of the below listed items apply to you in relationship to the accident report you are requesting. Please be prepared to provide a valid government issued identification card, driver's license, and / or other documentation.

<input type="checkbox"/>	I am the driver or any other person involved in the accident.
<input type="checkbox"/>	I am the authorized representative of any person involved in the accident. Please list the name of your client: _____
<input type="checkbox"/>	I am the employer, parent, or legal guardian of a driver involved in the accident. Please list the name of the driver: _____
<input type="checkbox"/>	I am the owner of a vehicle or property damaged in the accident. Please provide basic vehicle or property description: _____
<input type="checkbox"/>	I am a person who has established financial responsibility for a vehicle involved in the accident.
<input type="checkbox"/>	I am currently a representative or employee of an insurance company that issued an insurance policy covering a vehicle or any person involved in the accident.
<input type="checkbox"/>	I am currently a person under contract to provide claims or underwriting information to a person or entity described in the preceding two items.
<input type="checkbox"/>	I am currently a representative or employee of a radio station, television, or newspaper.
<input type="checkbox"/>	I am currently a person or entity who may sue because of death resulting from the accident.
<input type="checkbox"/>	I do not fall within any of the above categories. I am requesting a redacted accident report.

Printed Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Perjury is a Class A misdemeanor under Texas Penal Code §37.02 and punishable by a fine not to exceed \$4000, up to a year confinement in jail, or both such fine and confinement.

I declare under penalty of perjury that the foregoing answers are true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, _____

Signature