



**BEAUMONT POLICE DEPARTMENT  
REQUEST FORM**

(All paper records cost \$0.45 per page)

- ( ) Traffic Collision  
( ) Crime/Other Incident/Dispatch Record  
( ) Property

**IDENTIFICATION WILL BE REQUESTED FOR PROPER RELEASE**

*Acceptable forms of identification - valid Driver's License, Passport, Alien Resident card.*

*MOST REQUESTS WILL BE AVAILABLE FOR RELEASE WITHIN 10 DAYS,  
SOME REQUESTS MAY REQUIRE ADDITIONAL TIME*

Case Number or Incident Number: \_\_\_\_\_

Type of Incident: \_\_\_\_\_ Date & Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_  
\_\_\_\_\_

Print Your Name: \_\_\_\_\_ Phone: (       ) \_\_\_\_\_

Address (incl. zip): \_\_\_\_\_

Email Address: \_\_\_\_\_

➤ What is your involvement in this case? (Check box)

Driver ☐      Passenger ☐      Pedestrian ☐      Property Owner ☐      Victim ☐

☐ Other (specify): \_\_\_\_\_

☐ Attorney (attorney/law office name and name of person you represent):  
\_\_\_\_\_

➤ Please explain what you are requesting along with your connection to this case.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only:**

Payment Received By: \_\_\_\_\_ Total Cost: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Date: \_\_\_\_\_

☐ Record Released    ☐ Record Withheld    Completed By: \_\_\_\_\_

☐ Withheld Reason: \_\_\_\_\_