## **KETCHIKAN POLICE DEPARTMENT**

361 MAIN STREET, KETCHIKAN, AK 99901 PH: 907-225-6631 FX: 907-247-6631



## **REQUEST FOR COPY OF POLICE REPORT**

Date of Incident:		KPD Case # (Completed by KPD)	
		(Comple	ted by KPD)
Description of Incident:			
Name of Individuals involved:			
Reason For Request:	□ Insurance	□ Personal	□ Other
	Information to	Requestor:	
I understand that all police reports business days for processing and the Signature:	nat the Ketchikan Police Do	epartment does not control t	ne length of time for approval
Print Name:			
Requestor's relationship to the	ose involved:		
Mailing Address:			
Phone #:		Fax#:	
Email:			
DV Related incident? YES / No	0	Date submitted to MAO:	
Intake Dispatcher:		Release: Approved $\Box$	Denied □
	(For office use or	nly)	