

Western Australia Police Force

Application for Abridged Crash Report

For use by **Personal Representatives** ONLY

Public Access

Office of Information Management Level 5 Westralia Square, 141 St Georges Terrace PERTH WA 6000

Enquiries: (08) 6229 5900 or PublicAccess@police.wa.gov.au

CRASH FILE NUMBER OR INCIDENT REPORT NUMBER (IF KNOWN)				ONLINE CRASH REFERENCE NUMBER (IF REPORTED ONLINE)						
Details of Personal Representative										
SURNA	AME		ORGANISATION NAME (IF RELEVA			RELEVANT)				
REPRESENTATION TYPE (PARENT / GUARDIAN, EXECUTOR, ADMINISTRATOR, POWER OF ATTORNEY)										
POSTAL ADDRESS			SUBURB				STATE	POSTCODE		
TELEPHONE NUMBER			EMAIL ADDRESS							
Details of Involved Party										
SURNAME			GIVEN NAME(S)		DATE OF			BIRTH		
INVOLVEMENT (E.G. DRIVER, PASSENGER, PROPERTY OWNER)						VEHICLE REGISTRATION				
Incident Information										
DATE OF INCIDENT LOCATIO			ION OF INCIDENT							
ADDITIONAL INFORMATION TO ASSIST STADOU										
ADDITIONAL INFORMATION TO ASSIST SEARCH										
									FEE: \$54.40	
☐ I have read, understood and agree to the terms under which the information is to be released.										
SIGNATURE DATE										
Application Checklist (Applications must include the following to be accepted)										
	Completed application form (or written request on company letterhead).									
	A copy of the representative's photo identification (e.g. driver's licence, photo card, passport).									
	Documentary proof of representation (e.g. relevant representation order or certificate).									
	Payment. Cheques and money orders made payable to "The Commissioner of Police". Money order vouchers cannot be accepted and will be returned.									
	Lodged in person at the Office of Information Management, or by post to LOCKED BAG 20, PERTH BUSINESS CENTRE WA 6849.									

For more information about Abridged Crash Reports visit www.wa.gov.au/organisation/western-australia-police-force/apply-wa-police-force-information

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