

Waynesboro Police Department
Request for Copy of Records

Date of Request: _____ Name of Requestor: _____
(Last Name, First Name, MI)

Address: _____ Phone number: _____

Record(s) Requested (circle): Incident Record/Dispatch Log

Police Report

Crash Report

Other _____

- **Note:** Police reports **may not** be subject to release in whole or in part due to containing criminal investigative information pursuant to VA Code Section 2.2-3706. All other records may have personal identification information redacted prior to release.

Number of Records Requested: _____

Date/Time of Incident(s): _____

Names of parties involved _____

Purpose (why you need the records, e.g. "insurance claim for damage to my car in an accident")

Copies of Records are \$5.00 each

Filed requests for records will be kept on file with the Waynesboro Police department for 30 days. If not picked up within this time, they will be destroyed and the requestor will have to submit a new request.