



CITY OF HARRISONBURG
POLICE
DEPARTMENT

CHIEF OF POLICE ERIC D. ENGLISH

101 NORTH MAIN STREET, HARRISONBURG, VA 22802

EMERGENCY NUMBER: 911

NONEMERGENCY NUMBER: (540) 434-4436

FAX NUMBER: (540) 437-2691

WWW.HARRISONBURGVA.GOV/POLICE

Request for Records

I, _____ (print name) do hereby affirm that I represent _____ in the following nature:

Attorney

Insurance Agent

Family Member

Self

Other (Government, Military) _____

Requested on this date: _____

Signed (requestor) _____

And in such representation, request the following documents related to the above named client:

Copy of Crash Report # _____

Verification letter for Incident Report # _____

Local Background Check (convictions only) *

**If requested by third party, record release form is required to be signed by represented party.*

Records Clerk responding to request: _____

Date of response: _____

Mailed In Person

Payment received: Cash Check Due on receipt