

## **Western Australia Police Force**

## **Application for Abridged Incident Report**

For use by Victims 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

INCIDENT / OFFENCE REPORT NUMBER (IF KNOWN)								
Deta	ails of Victim							
SURNAME / BUSINESS NAME		GIVEN NAME(S)		DATE OF BIRTH				
POSTAL ADDRESS			SUBURB			STATE	POSTCODE	
TELEPHONE NUMBER		EMAIL ADDRESS	EMAIL ADDRESS					
Incident Information								
			TION OF INCIDEN	-				
NATURE OF OFFENCE (BURGLARY, STEALING, DAMAGE, ASSAULT, ETC.)  REASON FOR APPLICATION (INSURANCE, COURT, COMPENSATION, ETC.)								
NATURE OF OFFEROE (BURGLART, STEALING, DAWAGE, ASSAULT, ETC				KEASON FOR ALL EIGHTON (INSUNANCE, COURT, COMIL ENGATION, ETC.)				
ADDITIONAL INFORMATION TO ASSIST SEARCH								
								FEE: \$49.10
☐ 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.							
	copy of your photo identification (e.g. driver's licence, photo card, passport).							
	Payment. Cheques and Money Orders to be made payable to "The Commissioner of Police". <b>Money Order vouchers cannot be accepted</b> 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 Incident Reports visit <a href="www.police.wa.gov.au/Police-Direct/Apply-for-Information">www.police.wa.gov.au/Police-Direct/Apply-for-Information</a>

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