



NEW JERSEY STATE PARK POLICE  
**RECORDS REQUEST FORM**

SOP 4.22  
 ANNEX B

**PROCEDURES FOR OBTAINING COPIES OF STATE PARK POLICE REPORTS**

**I. ACCIDENT REPORTS, NON-CRIMINAL INCIDENT REPORTS**

A. For copies of the above reports contact or write to:

New Jersey State Park Police - Records Bureau  
 501 East State Street, Mail Code 501-04  
 PO Box 420  
 Trenton, New Jersey, 08625-0420  
 Telephone: (609)-292-4744  
 Fax: (609)-633-7594

1. Complete lower portion of this form and return with the proper fee(s).
2. Request for reports must be accompanied with a certified check, business check or money order made payable to **Treasurer, State of New Jersey.**

3. FEES

i. COPY FEES: (POSTAGE NOT INCLUDED)

First page to tenth page . . . . .	\$0.75 per page
Eleventh page to twentieth page . . . . .	\$0.50 per page
All pages over Twenty . . . . .	\$0.25 per page

ii. POSTAGE FEES:

Pages 1 to 6 . . . . .	\$0.45	Pages 13 to 17. . . . .	\$0.90
Pages 7 to 12 . . . . .	\$0.69	Pages 18 to 20. . . . .	\$1.14

iii. MOTOR VEHICLE ACCIDENT REPORT:

Accident Report . . . . .	\$5.00 (Postage Included)
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**REPORT REQUEST INFORMATION**

To obtain copies of State Park Police motor vehicle accident reports or incident reports this form must be completed and returned to the APPROPRIATE AUTHORITY INDICATED ABOVE. Please provide the necessary information in this section and return with the proper fee(s). **DO NOT SEND CASH.** Reports subject to the discovery process will not be released. Instead, those requests must be in writing and forwarded directly to the appropriate municipal/county prosecutor. This form is used to facilitate your request for the reports listed below.

Requesting Party/Authority: [Click here to enter text.](#)      Address: [Click here to enter text.](#)  
 Telephone Number: [Click here to enter text.](#)      Location of Incident: [Click here to enter text.](#)  
 Date of Incident: [Click here to enter text.](#)      Officers Name/ID: [Click here to enter text.](#)

**IF KNOWN, CHECK TYPE OF REPORT REQUESTED**

- Accident Report [Click here to enter text.](#)(File #)       Incident Report [Click here to enter text.](#) (File #)  
 Drinking-Driving Report [Click here to enter text.](#) (File #)       Accidental Injury/Death [Click here to enter text.](#)(File#)  
 Other – Explain: [Click here to enter text.](#)

**NOTE: REPORTS WILL NOT BE AVAILABLE TO ANYONE APPLYING IN PERSON. THIS FORM MUST BE COMPLETED AND FORWARDED WITH THE PROPER FEE.**