

Incident and Crash Report Request Form

Kanawha County Sheriff's Office

REQUESTOR INFORMATION	Email:
Name:	
Address:	
City:	
INCIDENT REPORT	VEHICLE CRASH REPORT
Date of Crime:	Date of Crash:
Type of Crime:	Location:
Location:	
Victim(s):	_
	Crash Report #:
Report #	
Fee Schedule for Re	constructed Reports ONLY
Date of Original Crash:	Reconstruction Report: \$500.00 x
Original Crash Report #:	Scene Scan Data: *\$500.00 x
FE	E SCHEDULE
Incident or Vehicle Crash Report \$20.00 x	Video/Audio Recordings (\$50.00/recording): *\$50.00 x
Requesters Signature	Photographs (\$1.00/photo): *\$1.00 x
Requesters Signature:	* Quantities and Prices will be given once request is processed
*Digital media will be provided by an electronic link These fees are for reports of 50 pages or less in lengt	h. An additional copy fee of \$1.00 per sheet will apply after 50 pages.
	CASHIER CHECKS, OR BUSINESS CHECKS ACCEPTED
· · · · · · · · · · · · · · · · · · ·	person at Kanawha County Sheriff's Office
Make personal check, cashier check, or bu	siness checks payable to: Kanawha County Sheriff's Office
Credit/Debit Card Payments (can not accept AMEX):	Credit/Debit Card Number:
Additional credit/debit processing fees apply.	Exp. Date: CVV: ZIP:
Send to the appropriate methods listed bel	ow, including payment and a self-addressed envelope
Authorizing Signature:	
	ident/ Crash Reports: County Sheriff's Office
301 Virginia Street E Phone: (304) 357-0200	
	ie: (304) 357-0200 :: (304) 357-0239
-	t be processed due to the following:
No fee/incorrect fee enclosed. See above Fee Check or Money Order is incomplete. Please	
Incomplete information submitted. Please in	
No report could be found based on the inform	
No Photos AvailableNo Video/Audio	
Report could not be provided due to pending Other:	active criminal, juvenile, and/or domestic investigation
Ouici.	
Records Custodian:	Date: