

INSTRUCTIONS FOR MAIL-IN REQUESTS

<p>1. Information MUST be typed or printed. Incomplete information may result in the return of your application.</p> <p>2. Include check or money order for \$10.00 payable to NYC Police Dept. THIS FEE IS NOT REFUNDABLE. DO NOT SEND CASH</p> <p>3. Enclose a stamped, self-addressed envelope.</p> <p>4. MAIL TO:</p>	<p>Check One</p> <p><input type="checkbox"/> Mail In</p> <p><input type="checkbox"/> In person</p>
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A) Aided Reports New York City Police Department
P.O. Box 2525
New York, New York 10272-0525
Att: Aided Unit

<p>B) Police Accident Report (MV-104AN)</p>	<p>Precinct of Occurrence Call 212-374-5000 For Precinct Mailing Address (30 Days Maximum) Request for Police Accident Reports Beyond 30 Days Should Be Directed To The N.Y.S. Dept. of Motor Vehicles</p>
<p>C) Motor Vehicle Accident And Mechanism Report (PD 301-151) Witness Statement-vehicle Accident (PD 301-061)</p>	<p>New York City Police Department Highway Unit #3 198-13 Grand Central Parkway Queens, NY 11423 Att: A.I.S.</p>

NOTE: Sections 2 and 4 **MUST** be completed in all cases or your request will be returned.
Completion of the additional sections will help to insure a thorough search.

If a motor vehicle was involved, check here <input checked="" type="checkbox"/>				If no motor vehicle was involved, check here <input type="checkbox"/>	
1. License Plate Number(s) of All Vehicles Involved				2. Date Of Occurrence	
Plate 1	Plate 2	Plate 3	Plate 4		
3. Name(s) of All Injured (Include Year of Birth and Sex)					
4. Place of Occurrence (Include Nearest Intersecting Street)			5. Precinct of Occurrence	6. ACC/Aided Report No.	
7. Operator(s) of Vehicle(s) -- Where Applicable					
8. Owner(s) of Vehicles(s) -- Where Applicable					
	Rank	Name	Shield No.	Precinct	
9. Aided/Accident Information Reported To		Officer			

