



**Tennessee Department of Safety and Homeland Security
Traffic Crash Report Request**

Please complete this form, sign it, and mail a check or money order for \$4.00 along with a self-addressed, stamped envelope to:

**Tennessee Department of Safety and Homeland Security
Financial Responsibility Division
PO Box 945
Nashville, TN 37202-0945**

Please select one of the following:

- I am a legal representative of a driver or property owner involved in the crash
- I own or lease an interest in property involved in the crash
- I am a driver involved in the crash
- I am the licensed insurance agent of a party involved in the crash, their insurer or insurers to which they applied for insurance coverage

By signing this request, I or the organization I represent qualify for disclosure of the crash report according to the options selected above and do swear or affirm that information contained in a crash report made confidential by statute will not be used for any other purpose including commercial solicitation of crash victims, or knowingly disclosed to any unauthorized third party for any purpose including solicitation.

Notice: Motor Vehicle crash information is regulated as provided in T.C.A. 55-10-108(d). You must be a driver involved in the crash, the owner of property involved in the crash, the insurer of any party who is the subject of the report, or a legal representative of the driver or owner. Obtaining a Motor Vehicle Crash Report from this request under false pretense is a criminal offense.

CRASH INFORMATION

(Please PRINT and provide as much information as you can.)

Name of a Driver: _____

Driver's License Number of Involved Individual: _____

Date of Crash: _____ License Plate Number: _____

Investigating Agency: _____

Incident Number: _____ County: _____

Roadway Name: _____ Roadway Number: _____

Signature: _____ DATE: _____

For more information call the Financial Responsibility Division Toll Free Help Line 1-866-903-7357 or visit our website:

<http://www.tn.gov/safety/dlmain.shtml>