Texas Department of Transportation
Form CR-91 (Rev. 04/08)
(GSD-EPC)
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REQUEST FOR COPY OF PEACE OFFICER'S CRASH REPORT

(Please Submit in Duplicate)

Mail To: Crash Records, Texas Department of Transportation, P.O. Box 12879, Austin, Texas 78711

Make check or M.O. payable to: Texas Department of Transportation **Questions? Call:** 512/486-5780

CHECK TYPE OF SERVICE DESIRED:

☐ Copy of Peace Officer's Crash Report - $6.00 each ☐ Certified Copy of Peace Officer's Crash Report - $8.00 each

DATE OF REQUEST _____ **CLAIM OR POLICY NO.** _____

Transportation Code, Sec.550.065. **RELEASE OF CRASH REPORTS.** (b) Except as provided by Subsection (c), a crash report held by the department is privileged and for the confidential use of: the department; and an agency of the United States, this state, or a local government of this state having use for the report for crash prevention purposes. (c) allows release of a crash report on written request and payment of required fee: (4) a person who provides the department or law enforcement agency with two or more of the following: date of the crash; the name of any person involved; the specific location of the crash.

Please provide as accurate and complete information as possible.

CRASH DATE _____
MONTH/DAY/YEAR

CRASH LOCATION _____ _____ _____
COUNTY CITY STREET OR HIGHWAY

WAS ANYONE KILLED IN THE CRASH? _____ **IF SO, NAME OF ONE DECEASED** _____

INVESTIGATING AGENCY AND/OR OFFICER'S NAME (if known) _____

DRIVER'S FULL NAME	DRIVER INFORMATION (if available) DATE OF BIRTH	TEXAS DL NUMBER	ADDRESS (if available)

PASSENGER'S FULL NAME	PEDESTRIAN or PEDALCYCLIST (if available)	ADDRESS (if available)

Texas Statute allows the investigating officer 10 days in which to submit his/her report.
Requests should not be submitted until at least 10 days after the crash date to allow time for receipt of the report.
The Law also provides that if an officer's report is not on file when a request for a copy of such report is received, a certification to that effect will be provided in lieu of the copy and the fee will be retained for the certification.

Mail to _____

Mailing address _____

City _____ **State** _____ **Zip** _____

E-mail _____

Requested by _____ **Phone #** _____

FOR TxDOT USE ONLY

Date Received _____ I.D. No. _____ Clerk _____

☐ Report Sent Date _____

☐ Report not on file Date Searched _____

Contact/Help Print Form