



Western Australia Police Force  
**Application for Information Report  
For Criminal Injuries Compensation**  
For use by **Personal Representatives ONLY**

**Public Access**  
Office of Information Management  
Level 5 Westralia Square, 141 St Georges Terrace  
PERTH WA 6000  
Enquiries: (08) 6229 5900 or [PublicAccess@police.wa.gov.au](mailto:PublicAccess@police.wa.gov.au)

INCIDENT / OFFENCE REPORT NUMBER (IF KNOWN)
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**Details of Personal Representative**

TITLE	SURNAME	GIVEN NAME	ORGANISATION NAME		
POSITION TITLE		REPRESENTATION TYPE (E.G. SOLICITOR)	REFERENCE NUMBER		
POSTAL ADDRESS		SUBURB	STATE	POSTCODE	
TELEPHONE NUMBER		EMAIL ADDRESS			

**Victim Details**

TITLE	SURNAME	GIVEN NAME(S)	DATE OF BIRTH
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**Incident Information**

INCIDENT DATE RANGE FROM	INCIDENT DATE RANGE TO
DETAILS OF INCIDENT (PLEASE INCLUDE NAME, LOCATIONS, TIME, AND DETAILS OF OFFENCES TO ASSIST OUR SEARCH)	
FEE: \$30.00	

I have read, understood and agree to the terms under which the information is to be released.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Application Checklist (Applications must include the following to be accepted)**

<input type="checkbox"/>	Completed application form (or written request on company letterhead).
<input type="checkbox"/>	Letter of consent signed by the victim authorising the release of information.
<input type="checkbox"/>	Payment. Cheques and Money Orders to be made payable to "The Commissioner of Police". <b>Money Order vouchers cannot be accepted.</b>
<input type="checkbox"/>	Lodged in person at the Office of Information Management, or by post to <b>LOCKED BAG 20, PERTH BUSINESS CENTRE WA 6849.</b>

For more information about Abridged Incident Reports visit [www.police.wa.gov.au/Police-Direct/Apply-for-Information](http://www.police.wa.gov.au/Police-Direct/Apply-for-Information)

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