JUPITER POLICE DEPARTMENT

Sworn Statement for Crash Report

Sworn Statement for Obtaining Crash Report within 60 Days of Filing

Sworn Statement for Obtaining Crash Report WITHIN 60 DAYS of Filing

Pursuant to § 316.066(2)(b), Florida Statutes, crash reports may be made available within 60 days of filing only to the following persons. Persons eligible to obtain a crash report during this 60-day period remain eligible once the 60 days has expired.

_____	_____	_____
Name of Requestor	**Date of Incident**	**JPD Case Number**

Please select the option that best describes you (select one):

☐ I am a party involved in the crash.

☐ I am the legal representative of _____ (party involved in the crash) (State/Bar Number:_____).

☐ I am a licensed insurance agent of, an insurer of, or an insurer to which coverage has been applied for by, _____ (party involved in the crash). (License number:_____).

☐ I am a person under contract to provide claim or underwriting information for a qualifying insurer. (Name of insurer:_____).

☐ I represent a victim services program. (Name of program:_____).

☐ I represent a federal, state, or local governmental agency or am a private person or entity acting on behalf of such agency in carrying out its functions. (Agency name:_____).

☐ I represent a radio or television station licensed by the FCC, or a newspaper qualified to publish legal notices under § 50.011 and § 50.031, Florida Statutes (Specified personal information must be redacted) (Name of media organization:_____).

☐ I am a third party acting on behalf of a person or entity listed above for disclosure of the crash report only to such person or entity. (Designate such person or entity by circling and completing the above section.) (Name of person or entity: _____).

Under penalty of perjury, I swear (or affirm) that the foregoing answers are true and complete and that the requested report will not be used for commercial solicitation of crash victims or knowingly disclosed to any third party for purposes of such solicitation.

_____
Signature of Requester

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization this _____ day of _____, 20_____, by_____, who is ☐ personally known or ☐ produced identification. Type of identification produced:_____

(NOTARY SEAL)

_____
Signature of Notary

_____
(Print, Type, or Stamp Commissioned Name of Notary Public)

My Commission expires:_____

NOTICE: Section 316.066(3), Florida Statutes, provides criminal penalties against persons who knowingly obtain confidential crash reports they are not entitled to or who use such confidential information in violation of a filed written sworn statement. The statute also authorizes civil penalties against persons who knowingly disclose or use such confidential information for purposes not permitted under DPPA.