



POLICE DEPARTMENT

# CITY OF OCEAN CITY

AMERICA'S GREATEST FAMILY RESORT

## REQUEST FOR REPORTS

Please fill in the form below, if you are involved in the incident, **INCLUDE A COPY OF YOUR ID**. If you are **NOT** involved in the incident, or are requesting body-worn camera footage you will need to fill out an **OPRA** form. This form can be mailed to the Police Records Bureau, e-mailed to [OCPDRECORDS@OCNJ.US](mailto:OCPDRECORDS@OCNJ.US), or returned to Ocean City Police Headquarters. The information requested, once complete, will be e-mailed to you unless otherwise specified. **PLEASE PRINT CLEARLY.**

INCIDENT REPORT # (IF KNOWN): \_\_\_\_\_

INCIDENT TYPE: \_\_\_\_\_

DATE OF INCIDENT: \_\_\_\_\_

OFFICER INVOLVED: \_\_\_\_\_

NAME OF VICTIM/DEFENDANT: \_\_\_\_\_

REQUESTORS NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

REQUESTORS INVOLVEMENT: \_\_\_\_\_

\_\_\_\_\_

Ocean City Police Department  
Records Bureau  
835 Central Avenue  
Ocean City, NJ 08226  
(609) 525-9161  
[OCPDRECORDS@OCNJ.US](mailto:OCPDRECORDS@OCNJ.US)