

Safety Camera Photograph Request Form

Only the person named on the original notice or an authorised representative of a company or incorporated body can request a safety camera photograph.

Please complete a separate form for each notice holder.

Police Notice Number: _____ ICN No: _____

Vehicle Registration No: _____

Police Notice Number: _____ ICN No: _____

Vehicle Registration No: _____

Police Notice Number: _____ ICN No: _____

Vehicle Registration No: _____

Address for reply:

(Box or Street Number)

(Street Name)

(Suburb)

(City)

(Postcode)

Email: _____

Reply to be sent by: ☐ Email ☐ Post *(Please tick One)*

Company name (if applicable) _____

I confirm I am authorised to act on the Company's behalf in requesting the above photographs.

Full Name of Requester: _____

Signature: _____ Date: _____

Complete this form and send it to:

Address: Police Infringement Bureau, PO Box 9147, Wellington 6141
Email: ticket@police.govt.nz
Fax: (04) 801 8848 (International +64 4 801 8848)

For more information visit: www.police.govt.nz or FREEPHONE 0800 105 777