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