

**Abbeville Police Department**  
**Chief Mike Hardy**

**Accident Report Request Form**

Name of Driver: \_\_\_\_\_

Date Of Crash: \_\_\_\_\_

Location of Crash: \_\_\_\_\_  
\_\_\_\_\_

Crash Occurred On: \_\_\_\_\_ City Street / Highway

\_\_\_\_\_ Private Property / Parking Lot

To obtain a crash report by mail, you must send a self-addressed envelope with the following:

- Print this page, filling out the information requested
- \$10 money order (no cash, no credit cards, no personal checks accepted)

And send it to the following address:

Abbeville Police Department  
304 Charity Street  
Abbeville, LA 70510  
Attn: Accident Reports

\*\*\*Please allow 7-10 business days for processing.