# Media Crash Data Request Form

**Crash data may take 2 weeks to gather.**
**More extensive data may take up to 4 weeks.**

Fill in this form completely and E-mail it to:
CrashInfoRequests@dot.nv.gov

## Media Information

| | |
|---|---|
| Date Requested | |
| Company Name | |
| Contact Name | |
| Phone Number | |
| Fax Number | |
| E-mail address | |

## Crash Information

| | |
|---|---|
| **Statistical Report Only:** | //////////////////////////// |
| Total Crashes, Fatalities, Injuries & Property Damage Only: | Year(s)      to |
| Total Pedestrian & Bicycle Crashes, Fatalities & Injuries: | Year(s)      to |
| Other Statistics (please explain): | |
| **County Name:** | |
| **Intersection:** | //////////////////////////// |
| Primary Street: | //////////////////////////// |
| Primary Street Name | |
| Cross Street: | //////////////////////////// |
| Cross Street Name | |
| **Road Segment:** | //////////////////////////// |
| Highway/Street Name | |
| From/Beginning Street | |
| To/Ending Street | |
| Beginning Mile Post | |
| Ending Mile Post | |

## Additional Information: