

INSTRUCTIONS:

Please indicate the nature of the Near Miss Traffic Incident.

This completed report will be submitted to the Maricopa Sheriff District 3 Traffic Deputies.

You can print the form then scan and e-mail to **SPSCTRFC@Gmail.com**

Your report can result in traffic enforcement that could save a life.

NEAR-MISS TRAFFIC REPORT

Date of Report

Name of Person Making Report (Optional)

Phone Number (Optional)

Date of Incident

Day of the Week

Location of Incident (Be Specific)

Direction You Were Traveling

Cause(s) (Circle all that apply)

Speeding Running a Red Light/Stop Sign Following too close Failure to Yield

Failure to Finish Left or Right Turn in Closest Lane Unsafe Lane Change

Failure to Maintain Lane Distracted Driving Unsafe Parking Other (Specify)

What Happened (Be Brief)

Posse Follow-up Date(s)

Observations

Date Given to District III
