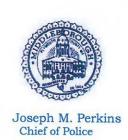
## MIDDLEBOROUGH POLICE DEPARTMENT



350 WOOD STREET MIDDLEBOROUGH, MA 02346 Tele (508) 947-1212 Clerks Fax (508) 947-3837 Dispatch Fax (508) 947-1009

## **PUBLIC RECORDS REQUEST FORM**

DATE OF REQUEST	
NAME OF PERSON REQUESTING REPORT	
ADDRESS OF PERSON REQUESTING REPORT	
PHONE # OF PERSON REQUESTING REPORT	
EMAIL OF PERSON REQUESTING REPORT	
PREFERRED DELIVERY METHOD	□PICK UP AT STATION □EMAIL □US MAIL □FAX(include number)
TYPE OF REPORT	MOTOR VEHICLE ACCIDENT REPORT INCIDENT REPORT DOMESTIC ABUSE REPORT OTHER (explain)
NAME OF PERSON(S) INVOLVED	
DATE OF ACCIDENT OR INCIDENT	TIME
LOCATION	
PLEASE SIGN FORM X	
******OFFICIAL DEPA	RTMENT USE ONLY – PLEASE DO NOT WRITE BELOW THIS LINE************************************
Dissemination: □Pick up	□Email □Phone Call □Fax □Other:
Date & Time Disseminated:	Fee:
Record Denied & Evernation	