

Pembroke Police Department
Written Request for Public Record Form

| | |
|-----------------------|------|
| Date of Request | |
| Name of Requester | |
| Address of Requester | |
| Home Telephone Number | Cell |

Below, please describe to the best of your ability the identifiable record or records you are requesting. Staff personnel will process your request in a timely manner. Nevertheless, M.G.L. c. 66, s.10[a] provides that every person having custody of a public record has up to 10 days to comply with the request. In no case will this provision be used as a reason to delay delivery of a record. In the event the record cannot be provided, you will receive an explanation of the cause for non-release.

| Record(s) Requested |
|----------------------------|
| Date of incident: |
| Type of incident |
| |
| |
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| |

Fee Schedule

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|---|--|
| Incident Reports Single page in hand at Desk \$0.50 | Video tape/CD \$25.00 per tape/cd plus postage |
| Single page via mail \$1.00 | 911 calls \$25.00 per tape plus postage |
| Accident Reports \$5 Insurance company requests \$5.00 | Domestic violence report- no charge |

Requests that require research will be assessed at \$20 per hour as part of the cost to produce the record.

| DO NOT WRITE BELOW THIS LINE-FOR OFFICIAL USE ONLY | |
|---|-------------------|
| Copy Release: [] | Copy Denied [] |
| If Denied, what exemption was relied on: | |
| Release approved by: | |
| If mailed, date mailed | Mailed by: |