



Town of Hubbardston

DEPARTMENT OF POLICE

7 MAIN STREET -
HUBBARDSTON, MASSACHUSETTS 01452
TEL. 978-928-1405 - FAX 978-928-5267

DENNIS G. PERRON
CHIEF OF POLICE

RECORD REQUEST FORM

Date of Request _____

Requestor's Name (please print) _____

Requestor's Address _____

Requestor's Phone # _____

Date of Incident _____ Time of Incident _____

Type of record(s) being requested _____

Additional information or comments _____

Signature of requestor _____

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Fee Schedule: Photo Copies- \$0.20
Computer Printouts- \$0.50
Photographs- \$0.50

The Hubbardston Police will provide a detailed, written good faith estimate for the cost of complying with a public record request when the cost of compliance exceeds ten (\$10.00). Hourly rate of the lowest paid employee capable of completing the task will be factored into any required searches and be stated in the good faith estimate

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Supervisor preparing record (s)

Date

How was record released ___ mail ___ in hand ___ other

Case # _____ Fee amount _____

Receipt # _____