



RYAN P. COUTURE
CHIEF OF POLICE

Town of Hubbardston

DEPARTMENT OF POLICE

7 MAIN STREET, UNIT #9
HUBBARDSTON, MASSACHUSETTS 01452
TEL. 978-928-1400 – FAX 978-928-5267

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 _____

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) dollars. Hourly rate of the lowest paid employee capable of completing the task will be factored in to any required searches and be stated in the good faith estimate.

Supervisor preparing record(s)

Date

How was this record released: mail _____ in hand _____ other _____

Case # _____ Fee amount \$ _____ Receipt # _____

Pdclerk/forms/record request