



Oak Bluffs Police Department

Erik G. Blake
Chief of Police

REQUEST FOR INFORMATION

Request's Last Name: _____ First: _____

Residential Address: _____

Mailing Address: _____

Phone Number: _____ Cell Phone: _____

Below, list the date of the incident (car accident, vandalism, etc.) location of incident, and other information that will locate the records you are requesting.

Cost:

1. For preparing, mailing, or faxing a report from agents and companies - **\$5.00**
2. **Public request under 2 hours – no charge**
3. Public request requiring more than 2 hours of employee time will be charged **\$24.38** per hour.
4. Copy of DVD **\$20.00**; Copy of photographs on DVD **\$20.00**

Request for information will be processed within 10 days as required by M.G.L. Chapter 66, Section 10.

I have read and understood the above information, and I request the information at the listed rate.

(Requester's Signature)

(Date & Time Submitted)

(Supervisor's Signature)

(Date Released/Denied)

Mailed/in hand

No. of pages

(Amount Received/owed)