

Scott A. Dumas Chief of Police

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## Town of Rowley Police Department

477 Haverhill Street P.O.Box 365 Rowley, Massachusetts 01969 www.rowleypolice.com ORI MA0052700



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## **REQUEST FOR REPORTS**

Certain information may not be released, this includes, but is not limited to, information regarding juvenile offenders, pending investigations, information that would impede investigations, and information that violates the right of personal privacy.

There may be a fee associated with this request. You will be notified in advance.

## PLEASE PROVIDE THE FOLLOWING INFORMATION YOUR PERSONAL INFORMATION

Today's Date:		
Your Name:		
Your Address:		
City:	State:	Zip:
Phone number:	Email address (if you prefer your records emailed):	

## **INCIDENT INFORMATION**

Type of Record:	Accident	Arrest Other			
Location of the incident:					
Date of the incident (if unknown provide a date range):					
Time of the incident:		Case Number (if known):			
Brief description of what r	ecord(s) you are seeking:				

 ------POLICE DEPARTMENT USE ONLY----- 

 Date Request Received:
 Amount Due: \$\_\_\_\_\_\_

Request Denied: Pending Investigation	Juv	venile Reasons	Other
Unable to process – reason		Referred to:	
Denied by	_Date	Notified by	Date
Request Approved           Approved without deletions	Approved with deletions		
	7	Types of deletions:	
Approved by:	I	Date:	