



## OTIS POLICE DEPARTMENT

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### Public Record Request Form

(Accident or Incidents occurring in Otis, MA)

**PHOTO ID MAY BE REQUIRED FOR RELEASE OF RECORDS**

Date: \_\_\_\_\_

Requester Name: \_\_\_\_\_

Address (Mailing or E-Mail): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address of Accident/Incident: \_\_\_\_\_

Type of Incident (Accident, Theft, Loss, Vandalism): \_\_\_\_\_

Date/Time of Incident: \_\_\_\_\_

Name(s) of Person(s) Involved in Incident: \_\_\_\_\_

If Accident, Name of Vehicle Operator: \_\_\_\_\_

Investigating Officer Name (If Known): \_\_\_\_\_

A response to the records request will be made within 10 business days, following receipt of the request. Requests can be e-mailed, mailed, faxed, or picked up/dropped off at The Otis Police Department. Please provide a telephone number in case more information is needed in order to complete this request.

Signature of Requester: \_\_\_\_\_

*Records requests may be denied, or records produced may be redacted for personal privacy, CORI, investigatory, public safety or other exemptions.*

Accident reports are also available from the RMV <http://www.mass.gov/rmv>.

Massachusetts CORI requests: CHSB (617)-660-4640 <http://www.mass.gov/chsb>.

### **For Department Use Only:**

Date Processed/Denied \_\_\_\_\_ Incident# \_\_\_\_\_ Fee Charged \_\_\_\_\_

Officer Initials \_\_\_\_\_