



DOUGLAS POLICE DEPARTMENT
PUBLIC RECORDS REQUEST FORM



It is the goal of the Douglas Police Department to provide the public with access to all public records that are not exempt by law. This Request Form has been created to assist you in receiving the specific records you are seeking. Please be advised that your records request can be made in person, by phone, by mail, or by email. All requests must be submitted to the Department's Record Access Officer listed below. Upon receipt, your request will be reviewed, and you will receive a response within 10 business days.

Records Access Officer:

Chief Nick L. Miglionico
Douglas Police Department
P.O. Box 244, 29 Depot Street
Douglas, Massachusetts 01516
508-476-2709 ext. 115
email: nmigs@douglas-ma.gov

Date Requested: _____

Requesting Party's Information:

Name: _____ Phone: (_____) – _____ – _____

Address: _____ Email: _____

Town / State / Zip: _____

Records Requested:

Date of Incident: _____ Name of Involved: _____

Nature of Incident: _____

Type of Record requested: ____ Accident Report ____ Arrest Report ____ Incident Report

Method of Delivery: ____ Email (no charge) ____ U.S. Mail ____ Pick-up when ready

Requests will be charged postage plus 5 cents per page for U.S. Mail delivery. Requests will be charged 5 cents per page for pick-up when ready. Please be advised that additional fees may apply depending on the request. If this is the case, you will be supplied with a good faith estimate prior to processing.