



MARK CHAMBERS  
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*Town of Westford*  
**POLICE DEPARTMENT**  
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Westford, MA 01886



MEMBER  
INTERNATIONAL ASSOC.  
OF CHIEFS OF POLICE  
N.E. ASSOCIATION OF  
CHIEFS OF POLICE  
MASS. CHIEFS OF  
POLICE ASSOCIATION

**POLICE REPORT REQUEST**

Date of Request: \_\_\_\_\_ Requested By: \_\_\_\_\_

Please include as much of the requested information as possible in order to process your report request.

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

Location of Incident/MV Crash: \_\_\_\_\_

*\*MV Crash Report option: <http://getcrashreports.com/>*

Nature of Incident (Report#, if known): \_\_\_\_\_

Officer(s) Name if Known: \_\_\_\_\_

Please select which method you would prefer for the requested report to be delivered

\_\_\_\_\_ I will pick-up the report(s) requested.

\_\_\_\_\_ Email (provide email address) \_\_\_\_\_

\_\_\_\_\_ Mail Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City & State, Zip Code: \_\_\_\_\_

\*\* Please provide number you can be contacted at: \_\_\_\_\_

Note: You should expect a response to this request within ten (10) days. Certain information in any police report may be redacted for privacy or confidentiality as authorized by Massachusetts Public Records Law.

Fee: There are no fees for public record(s) requests, unless notified due to the volume of requested information