



# Orford Police Department

2529 Route 25A Orford NH 03777

Phone# 603-353-4252 Fax# 603-353-4251 Emergencies # 911

Chief Jason D Bachus

## RECORDS DIVISION

This is my written request for report/incident #: \_\_\_\_\_

which occurred on (date) \_\_\_\_\_. The Officer who handled this incident is

(if known): \_\_\_\_\_.

**I understand that the cost of this report is a prepayment of \$25.00 and that the Chief of Police reserves the right to control the release of all department records. I also understand that if released, I will receive my report/incident in the mail in approximately seven to ten days.**

Please explain briefly the purpose of your request and what type of report you are requesting (accident, theft, etc.):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date Name Printed/Signature Telephone Number

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

**Make Check Payable To:** Town of Orford

**Return This Form & Payment To:** Orford Police Department  
2529 Route 25A  
Orford, NH 03777