



# TOWN OF MEREDITH POLICE DEPARTMENT

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KEVIN A. MORROW  
*Chief*

## REPORT REQUEST FORM

\_\_\_\_\_  
Name (please print)

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

\_\_\_\_\_  
City / State / Zip

\_\_\_\_\_  
(Telephone #)

The Meredith Police Department reserves the right, by law, to withhold any and/or all information that may jeopardize any police investigation and/or any information that may violate the rights of victims and/or juveniles. You must be directly involved with the specific case(s) that you are requesting in order for the Meredith Police Department to release any and/or all report(s). All requests are reviewed on a case by case basis to ensure the legal integrity of the report(s) as well as the protection of all involved parties. **IF** you are involved in a criminal case and have hired an attorney to represent you in a court of law, then your attorney should be filing for Discovery with the Prosecutor of the Meredith Police Department.

I, \_\_\_\_\_, am requesting the following report(s):  
(Name, please print)

Call For Service #: \_\_\_\_\_ Date (or approximate date): \_\_\_\_\_

Incident Report#: \_\_\_\_\_ Date (or approximate date): \_\_\_\_\_

Arrest Report#: \_\_\_\_\_ Date (or approximate date): \_\_\_\_\_

Accident Report#: \_\_\_\_\_ Date (or approximate date): \_\_\_\_\_

Other: \_\_\_\_\_ Date (or approximate date): \_\_\_\_\_

Fees: Incident/Accident/Arrest Reports: \$10.00 each

Fatal Accident Reports: \$25.00 each

All other requests: \$1.00/page

Total Due: \$ \_\_\_\_\_

Office Use Only: Date Requested: \_\_\_\_\_ Dispatch CFS#: \_\_\_\_\_

Granted: Yes / No Denied w/Reason: \_\_\_\_\_

Date Contacted for Pick Up: \_\_\_\_\_ @Time: \_\_\_\_\_ Date Mailed Out: \_\_\_\_\_