



# Center Harbor Police Department

36 Main Street / PO Box 140  
Center Harbor, NH 03226  
Dispatch 603-253-9756  
Fax 603-253-8241

## REPORT REQUEST FORM

Please Print:

\_\_\_\_\_ Name

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

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

The Center Harbor Police Department reserves the right to withhold any and all information that may jeopardize any police investigation and/or any information that may violate the rights of victims, juveniles, or any person involved in an incident. Accident Reports may only be obtained by persons involved and/or their Insurance carriers.

Please provide the date (or approximate), the location, and a brief description of the nature of the incident you are requesting the report on:

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

Fees: Incident/Arrest \$10.00 \_\_\_\_\_  
All other requests \$1.00/page \_\_\_\_\_ Total \$ \_\_\_\_\_

I would like the report(s) mailed to the above address

I will pick up the report(s) when ready

### Office use Only

Call For Service \_\_\_\_\_  
Call number \_\_\_\_\_

Incident Report \_\_\_\_\_  
Case number \_\_\_\_\_

Arrest Report \_\_\_\_\_  
Case number \_\_\_\_\_

\_\_\_\_\_ Granted Date Mailed or Picked up \_\_\_\_\_  
\_\_\_\_\_ Denied Reason: \_\_\_\_\_

\*No accident reports can be provided. Please use Form DSMV 505 located at [www.nh.gov/safety](http://www.nh.gov/safety)