THIRD PARTY ACCESS REQUEST FORM (Request for Police Officer's Incident Report)

Wareham, MA 0	20
Date	20
TO THE WARE	IAM POLICE DEPARTMENT:
I,	, hereby authorize my Attorney
	C
	of
OR his/her represe	ntative, to secure Police Report of an incident that took place 20, at/or near
OR his/her represe	ntative, to secure Police Report of an incident that took place
OR his/her represe	ntative, to secure Police Report of an incident that took place 20, at/or near

Print Name