



CITY OF HAVERHILL
Office of the City Clerk – Records Access Officer
4 Summer St, Room 118
Haverhill MA 01830
978-374-2312
cityclerk@cityofhaverhill.com
publicrecordsrequest@cityofhaverhill.com

PUBLIC RECORDS REQUEST FORM

TO MOST EFFICIENTLY SATISFY YOUR PUBLIC RECORDS REQUEST, WE ASK FOR THE FOLLOWING INFORMATION:

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

E-MAIL: _____

FULL DESCRIPTION OF THE INFORMATION YOU ARE REQUESTING. PROVIDE THE SPECIFIC TIME PERIODS FOR WHICH YOU ARE SEEKING THE ABOVE RECORDS:

WE WILL CONTACT YOU WITH AN ESTIMATED COST, IF APPLICABLE. PAYMENT MUST BE RECEIVED BEFORE YOUR REQUEST IS PROCESSED. ALL CHECKS MADE OUT TO CITY OF HAVERHILL.

WHEN THE INFORMATION/DATA HAS BEEN COMPILED, WE WILL CONTACT YOU. PLEASE ALLOW UP TO (10) TEN DAYS TO FULFILL YOUR REQUEST.

SIGNATURE

DATE