RECORD REQUEST FORM
TOWN OF HAMPDEN

TO BE COMPLETED BY CUSTOMER

DATE: _____

NAME: _____
ADDRESS: _____
_____
TELEPHONE: _____ EMAIL: _____

SPECIFIC RECORD(S) REQUESTED:
_____
_____
_____
_____
_____

FORMAT REQUESTED: _____

_____
SIGNATURE

TO BE COMPLETED BY STAFF AND RETURNED TO CUSTOMER

DATE RECEIVED: _____

ESTIMATED TIME FOR COMPLETION OF REQUEST: _____

ESTIMATED COST:
CD/DVD FEE _____
COPIER FEES _____
$15 PER HOUR RESEARCH (FOR ALL HOURS OVER 1)
$15 x ___ HOURS = _____

PAYMENT IN ADVANCE IS REQUIRED FOR ALL ESTIMATES OVER $100.

____ RECORD IS CONSIDERED CONFIDENTIAL PURSUANT TO MAINE LAW AND WILL NOT BE PROVIDED