



# TOPSHAM POLICE DEPARTMENT

100 Main Street, Topsham, ME 04086  
Phone: (207) 725-4337 Fax: (207) 725-4604



**Marc R. Hagan**  
Chief of Police

## Request for Information Freedom of Information Act (FOIA/FOAA)

**William S. Collins**  
Lieutenant

Return the completed form to [policerecordsrequest@topshammaine.com](mailto:policerecordsrequest@topshammaine.com)  
or to the address above via mail or in person

### Description of Records Requested

Date of Request: \_\_\_\_\_

Please list the name of the document(s), incident number (if known), the type of document(s), date of or date range of requested document(s), name(s) of involved person(s), and any other information that will identify the record. Be as detailed as possible.

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**Note:** Not all records are public records or available for release. The Freedom of Access Law designates some records as confidential. Examples of confidential records are: Medical records, juvenile records, an assortment of non-conviction data, intelligence and investigative information, and others (see M.R.S. Title 1, Chapter 13 §402 and M.R.S. Title 16, chapter 9). If records are denied or information redacted, the reason(s) will be provided. We will notify you within 5 business days to acknowledge receipt of this request and discuss clarifying details and/or estimated fees, if any.

### Your Contact Information

Please provide your contact information where you may be reached. We may have questions concerning your request or need to notify you of an estimated time and cost requirement to complete the request.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**Preferred delivery method:**       Email PDFs       Pick up copies       Mail copies

*If not specified, files will be provided by email. Requests for copies of documents may be subject to a fee, see below.*

<p><b><u>For official use only</u></b></p> <p><b>Associated Fees (notify of charges):</b></p> <p>Total Fee Due \$ _____</p> <p>\$ _____ Incident Report (\$0.10 per page: _____)</p> <p>\$ _____ Digital copies on CD (\$5.00 per CD)</p> <p>\$ _____ Research Fee (2 hrs free, then \$25 per hour)</p> <p>\$ _____ Postage Fee</p> <p><i>Fees to be paid to Town of Topsham - Attach receipt</i></p>	<p><b><u>For official use only</u></b></p> <p><b>Incident #</b> _____</p> <p>Request Received: _____ by: _____</p> <p>Date Acknowledged: _____ by: _____</p> <p>Date Processed: _____ by: _____</p>
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