

# PUBLIC RECORDS REQUEST FORM

*Completion of this form is optional, but assists us by identifying records requested, providing methods for communication with questions and specifying options for receipt of records*

Record Requests must be submitted by one of the following methods:

1. By mail or in person

**Town of Norwell**

**Town Clerk**

**Records Access Officer**

**PO BOX 295**

**Norwell MA 02061**

2. By Fax: **781-659-8073**

3. By Email: [panderson@townofnorwell.net](mailto:panderson@townofnorwell.net)

Please call **781-659-8072**, or email [panderson@townofnorwell.net](mailto:panderson@townofnorwell.net), if you have questions.

Requesting records of \_\_\_\_\_  
*(Department or Committee)* \_\_\_\_\_ *(Date)*

Please describe record(s) requested (attach an additional page if necessary):

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I wish to receive record electronically by email

I wish to receive record on disc or USB drive

I wish to receive record in paper form

I will pick up

Please mail

Please fax (Provide fax number) \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_

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