



Office of the Town Clerk

Town of North Brookfield
215 North Main St., North Brookfield, MA 01535
508-867-0203
townclerk@northbrookfield.net

For Office Use Only

Date Stamp

Request #: _____

Public Records Request Form

Please email to townclerk@northbrookfield.net

Date of Request:

Description of Materials Sought (please be as specific as possible to insure we get you exactly what you are looking for)

Requestor Information – Please Print Clearly

Name of Requestor:

Firm/Company:

Address:

City/Town:

State:

Zip:

Phone Number:

Email:

How do you want to receive materials? Hard Copy* Electronic Copies (E-mailed)
\$0.05 per page, plus search, redaction and/or copy fees apply – a good faith estimate
will be provided prior to work being done

Additional Information:

For Master Public Records Officer's Use Only

Date Issued to Custodian: _____

Custodian / Department: _____

Date of Initial Response: _____

Date of Further Response: _____

Date Records Provided: _____

Number of Hours to Fill: _____

Total Fees w/Breakdown: _____

Other: _____

Amount Paid & Date: _____