



WATERTOWN POLICE DEPARTMENT

Bureau of Administrative Services

552 Main Street , Watertown, MA. 02472

Records Telephone (617) 972-6527



Request for a WATERTOWN ONLY background check

Please print neatly

REQUESTING PARTY

Today's Date: _____

Individual who is requesting the background check _____

Telephone number(s) where you can be reached : _____

Your current address : _____

Agency requesting or Relationship to individual being checked : _____

Copy of Agency ID or Driver's License allowed: Yes _____ No _____

INDIVIDUAL REQUESTING BACKGROUND CHECK ON

Full Name : _____

Date of Birth: _____

Social Security Number : _____

Driver's License Number: _____

Sex : Female / Male (circle one)

Background Liability Release attached Yes _____ No _____

Did the individual work and/or live in Watertown? live ___ work ___ Time frame _____ to _____
month / year month / year

Watertown address of the individual's residence and/or employer : _____

Purpose of the request? (Ex : employment, immigration, adoption, visa, etc) : _____

Official Stamp/Seal requested Yes _____ No _____ (no fee for stamp, \$1 fee for embossed seal)

Signature : _____ Date : _____

NOTE : Release of any record is subject to the provisions and allowable fees of the Public Records Laws. All estimated fees to be paid by Bank Check payable to the Town of Watertown. (no personal checks allowed, estimated fees to apply to 5 record pages or more) If payment has not been received within ten days, we will close this request without any action. TIME requirements: Generally notification is made within 10 business days of the date of the request. You will be notified when the results are ready to be picked up or mailed upon prior agreement. Results will be held at the records desk for 10 days after the date they are completed for agreed upon station pickup.

For your convenience, please do not come to the station for the results until you have been notified.