ANDOVER POLICE DEPARTMENT

Record of Inspection and/or Copying of Criminal Offender Record Information

Criminal Offender Record Information shall be abbreviated as "CORI" on this form.
The individual named in the CORI shall be referred to in this form as "The Individual".
NO PERSONS SHALL BE PERMITTED TO INSPECT AND/OR COPY CORI UNLESS THEY FIRST PRESENT A PROPERLY COMPLETED "AUTHORIZATION FORM."

1. Identity of Person Inspecting and/or copying CORI

a. Name: _____
First Middle Last

Maiden Name: _____

Date of Birth: _____

b. Current Address: _____
Street

_____ _____ _____
Town State Zip

Do you currently reside in **Andover, MA ?** Y N

How long have you resided in **Andover, MA ?** _____ yrs. _____ mths.

c. Current Telephone number: (_____) _____ - _____
Area code

d. Occupation: _____

e. Signature: _____

2. The person is any other agent authorized by "The Individual" to inspect and/or copy CORI for the sole purpose of disseminating the CORI to "The Individual."

3. Date of Inspection: _____ / _____ / _____ Time of Day: _____ AM PM
Month Day Year