

PUBLIC RECORDS REQUEST FORM

APPLICANT INFORMATION

Name:

Address:

Phone:

Date of Request:

SPECIFIC PUBLIC RECORD(S) REQUESTED

Is the information requested for a commercial purpose? _____ If so, please explain.

Signature

FOR OFFICE USE ONLY

() The records requested are available for immediate inspection and may be reviewed at _____ on _____ at _____ AM/PM.

() The records requested are not available at this time, but may be inspected at the _____ on _____, at _____ AM/PM. The delay is due to:

- () Active use of requested records.
- () Records are in storage and must be located.
- () Records are not otherwise available.
- () Other.

() This request for inspection is denied due to the following reason(s):

- () Records requested are exempt by law from mandatory disclosure.
- () The request places an unreasonable burden on the custodian in producing voluminous public records.
- () Other (specify) _____

() I have received the above requested records and understand that I may make abstracts or have copies made, but may not remove these public records from this room.

() Please copy the following at a fee of \$ 0.10 per page:

Public record (s): _____
 No. of copies of each page: _____
 Pages to be copied are as follows: _____
 Total Amount Paid: _____

Signature of Custodian _____

Date of release/denial _____

FOR OFFICE USE ONLY	Log # _____	Date Due _____
Routed to _____		Date _____
Disposition _____		
