

VILLAGE OF ANGEL FIRE REQUEST TO INSPECT PUBLIC RECORDS

Name of Requester _____ Date _____

Mailing Address _____

Telephone or Message # _____

Description of records requesting:

Any copy made of the record requested will be subject to a cost of \$0.50 per page, charged by the Village Clerk. Videotape copying fees are \$15.00, CD copying fees are \$5.00 each and \$2.50 for each additional CD's containing the same information (per Resolution No. 2011-12) I agree to pay the fee for copies in advance before any copies are made.

Note: If records are not inspected by the requester within 5 business days of notification, they will be returned to their respective departments. The requester will then be required to complete another Request for Public Records form.

Public records will be available for inspection from 8:00 a.m. to 4:00 p.m. on normal business days, in the presence of the records custodian. Original records may not be removed from the Village Offices.

Signature of person requesting records inspection

Signature of person receiving form

*** Office Use Only ***	
Date Received: _____	Date Documents Ready: _____
Approved: _____ Disapproved for the following reason(s): _____	

_____ Three-Day Letter Sent	Date: _____
_____ Wrong Custodian Letter Sent	Date: _____
_____ Excessively Burdensome Letter Sent	Date: _____
_____ Denial Letter Sent	Date: _____
_____ Other Letter Sent	Date: _____
Date Requester Notified: _____	How Notified: _____
Date Requester Notified: _____	How Notified: _____
Date Requester Inspected Records: _____	
# of Copies Made: _____ Total Charge: \$ _____ Date Complete _____	