



Jennifer A. Evelyn, City Clerk

**PUBLIC RECORDS REQUEST FORM**

Name:

Company:

Address:

Phone:

Cell:

Fax:

**Request for Review or Copies of the following Public Record (s)  
Please specify: Ordinance, Resolution, Minutes, Lien Request, Other**

**Received By:**

**Date:**

**ADMINISTRATIVE USE ONLY**

*Office of the City Clerk: Date Request Received*

**Status:**  *Delivered*  *No Records Responsive to Request*  *Records are Exempt*  *Other*

**# of Pages** **Cost**  *Picked Up*  *Faxed*  *Emailed*

**Costs:** *\$0.15/page – first 50 pages and \$0.10/page 51+ pages*

**Lien Requests:** *\$65.00 per folio number – 5 business days*

*\$85.00 per folio number – 2 business days*

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