

Municipal Government Public Records Request Form

Instructions: Please complete this form to request access to public records maintained by the municipality. Once completed, print this form and submit it to the Municipal Clerk's Office via mail, email, or in person.

1. Requester Information

Full Name:

Organization (if applicable):

Mailing Address:

City, State, Zip Code:

Phone Number:

Email Address:

2. Record(s) Requested

Describe the records you are requesting with as much specificity as possible. Include names, dates, subject matter, and any department or agency involved.

Description of Record(s) Line 1:

Description of Record(s) Line 2:

Description of Record(s) Line 3:

Applicable Date Range of Records:

Preferred Format (e.g., Paper Copy, Electronic/Email, Inspection Only):

3. Signature and Date

By signing below, I certify that the information provided is true and correct to the best of my knowledge.

Handwritten Signature (Print and Sign):

Date of Request:

Office Use Only

Received By (Staff Name): Date Received:

Request Tracking Number: Status (Pending/Approved/Denied):