

Pleasant Grove City Records Request Form

Name of Person Requesting Records:		Date of Birth:		
Street Address		City	State	Zip Code
Date	Day Time Telephone	Email Address		
DESCRIPTION OF	RECORD SOUGHT IN I	DETAIL		
DI EACE INITIAL 7	THOSE THAT APPLY:			
city shall charge Thirt period for times in have specified and the copy for 8 ½ x 11 one-s \$.75 per copy, colored c I would like to wou supporting your req I am the subject of t I am authorized to authorization) I am requesting expare required for a expedited response Note: Copies of the in business days after recodemonstrates that expedited.	the information in the request have access by the subject of the dedicted response. (Please attackstory, for broadcast or publication under UCA 63G-2-204(3).) Information requested will eiving a written request or dited response to the record	nour. In determining the f that I will be contacted if th uest until I have authorized es (8½ x 11) shall be\$.50 pe \$2; 11 x 17, \$4; 22 x 17, \$8 e records and request a waiv \$3).) ed record. of the records or by the pe th information that shows yo c action; or attached other be provided as soon as five business days after	ee, the city shall round the estimated costs are good adequate costs. Photo er copy, 11 x 14 and lar as 50; 36 x 24, \$15; and the er of costs. (Please attained as a member of costs are good as a member of costs are good as a member of costs and the er of costs are good as a member of costs and the er of costs are good as a member of c	greater than the amount I copies shall be \$.25 per reger photocopies shall be 42 x 36, \$25. ached information the information. (Provide of the media and records onstrates that you are to be the property of the provide of the media and records onstrates that you are to be the provide of the media and records onstrates that you are to be the provide of the media and records onstrates that you are to be the provide of the media and records onstrates that you are to be the provide of the media and records on the provide of the p
Signature	This request may be del	Date ayed if all the informati	ion is not provided	
FOF	R OFFICE USE ONLY			
Date Received:		Due Date:_		
Received by:		-	eted:	
Completed by: Amount Due:		_ Date picked	up:	
ID #		<u>G</u> , ,	· Dlassact C	C't D 1
		Signature	: Pleasant Grove	City Recorder