

## **PUBLIC RECORDS REQUEST FORM**

REQUEST TO REVIEW RECORDS	REQUEST FOR COPIES
REQUESTING PARTY INFORMATION (PLE	ASE PRINT OR TYPE):
REQUESTING PARTY:	
MAILING ADDRESS:	
Please indicate the best way for staff to	o reach you regarding your request:
PHONE:	MOBILE:
EMAIL:	
DESCRIPTION OF RECORDS REQUESTED	(if known, the following information will help fulfill your request)
ASSESSOR'S PARCEL NUMBER(S):	
PROPERTY ADDRESS:	
TYPE OF RECORDS, IF KNOWN:	
PLANNINGBUILDINGCODE	ENFORCEMENTOTHERALL
TIME PERIOD FOR RECORDS: BEGINN	ING DATE:/
END D	DATE:/
DESCRIPTION:	
******	************
RECEIVED BY:	

Send to: Public Records Act Manager immediately