



CITY OF GAUTIER

PUBLIC RECORDS REQUEST

(Please Print or Type)

Today's Date: _____ Phone: _____

Person Requesting: _____ Fax: _____

Address: _____

Name of Business (If Applicable): _____

If Attorney/Insurance Co. Making Request; Client's Name: _____

Subject Matter: _____

(Any request shall be clear and concise and shall be directed toward only one subject matter.)

- | | | | | | | |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------|--------------------------|--------------------------|
| MANNER OF COMPLIANCE | <input type="checkbox"/> | Personally Inspect | <input type="checkbox"/> | MANNER OF DELIVERY | <input type="checkbox"/> | By Mail to Address Above |
| | <input type="checkbox"/> | Personally Copy | | | <input type="checkbox"/> | Pick Up In Person |
| | <input type="checkbox"/> | Photocopy of Document(s) | | | <input type="checkbox"/> | Fax (If Possible) |
| | | | | | <input type="checkbox"/> | Email (If Possible) |

For further information regarding this form and the City of Gautier's Public Records Policy; Please see Chapter 2, Article I, Section 2-1, Code of Ordinances, City of Gautier, MS and Section 25-61-7 of the Mississippi Annotated Code, "Public Records Act of 1983". A copy of these Code Sections is available for review upon request. I understand that there may be a charge for this information including but not limited to \$.30 per copy and the actual cost of searching, reviewing, and if applicable, mailing copies and cost for certification thereof, if required.
A RESPONSE TO YOUR REQUEST WILL BE PROVIDED WITHIN SEVEN (7) WORKING DAYS OF YOUR WRITTEN REQUEST.

Signature of Person Requesting Records

FOR OFFICE USE ONLY

REQUEST IS DIRECTED TO: City Clerk/City Hall _____

ATTENTION

ESTIMATE OF COST:

Copies	@ \$.30 each	_____
Research	@ _____	_____
Computer Time	@ \$ _____	_____
Other Cost	@ \$ _____	_____
Postage	@ \$ _____	_____
Total Amount Due		\$ _____
Receipt # _____	Amount Paid	_____

Pursuant to City policy and Mississippi Law, a public record must be produced or a denial of production must be given within 14 days of the date of request to ensure a timely response to the public record request the Department Contact Person should make certain that the requested record is retrieved from the Department files and forwarded to the Clerk's Office within three (3) working days after the Department Contact Person receives the request.

DEPARTMENT SECTION

Request Approved Request Denied

Date of Compliance: _____ Department Contact Person: _____

CLERK'S OFFICE

Date Completed: _____

Due Date: _____

Rec'd by: _____

Date: _____