REQUEST FOR RECORDS

This form is to be utilized to request copies or review documents in the possession of The City of Fountain, subject to the provisions and restrictions of the Open Record Act (C.R.S. Article 72). Copies are subject to applicable charges. Total charges may vary for records that require extensive preparation, retrieval or research efforts involving staff time of 30 minutes or more. Where total charges are in excess of $10, prepayment is required. Cost estimates shall be provided to the customer prior to providing the services requested and payment shall be rendered prior to the commencement of work.

**Requestor Information:**

Name: ___________________________ Date of Request: ______________

Company (if applicable): ___________________________

Address: ___________________________ E-Mail (optional): ____________

Telephone #: ______________________ Fax #: ______________________

___ Licensed Business Personnel Records ___ Planning/Zoning Info

___ Minutes: Council; Planning Commission; Park Board; Board of Adjustment; EDC

___ Other

Specific Information Requested:

_________________________________________________________________

_________________________________________________________________

Reason for Requesting Information:

_________________________________________________________________

Requestor’s Signature: ___________________________ Date: ____________

**For Office Use Only:**

___ Approved ___ Denied If denied, reason (if applicable): ______________

Processed by: ___________________________ Date: ____________

Summary description of documents provided/reviewed: ___________________________

_________________________________________________________________

**Estimate or Actual Costs:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Calculation</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copies</td>
<td>15 pages x $0.25 per page</td>
<td>= $3.75</td>
</tr>
<tr>
<td>Research Time</td>
<td>2 hrs x $25.00</td>
<td>= $50.00</td>
</tr>
<tr>
<td>Miscellaneous charges</td>
<td></td>
<td>= $0.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>= $53.75</td>
</tr>
</tbody>
</table>

Prepayment Required?: Y N

Prepayment Received: Date: ____________ Amount: ____________

Estimate approved by Requestor: ______________________ Date: ____________

Prepayment Received: Date: ____________ Amount: ____________