GENERAL DATA ACCESS REQUEST

NOTICE: You may cancel this request at any time prior to the release of information. You may be required to pay the actual costs of making copies and/or compiling data if your request exceeds 100 pages.

NOTE: The subject of the data request must authorize the release of private information. A "Consent to Release Private Data" form must be completed by the subject of the data.

Completed by Requester

Name (Last, First, MI)		Date of Request
	C.	
Address	Phone Number	Email Address
	-	
City, State, Zip		
email you copies of data, we will n request and need to get clarification your request until you contact us.	eed some type of contact infor n from you, without contact in	n public data. However, if you want us to mail or rmation. In addition, if we do not understand your formation we will not be able to begin processing
I am requesting access to da	ata in the following way	(Note: inspection is free but the City charges for copies)
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