



Request to Inspect Public Records
Georgia Open Records Act (O.C.G.A § 50-18-70 et seq.)

In order to provide the correct records requested in the most efficient manor, we request that you complete this informational form to make you request for records.

List the name and date of the records you are requesting:

____ I would like to ____ inspect documents ____ or receive copies within three business days of this request if the records are available and not exempted by law; however, I understand that if the records cannot be produced within three business days, a timetable for their release will be provided to me (50-18-71(b)(1)(A); or

____ I do not need the documents within three business days, but would like to ____ inspect or ____ receive the copies by _____.

I agree to pay any copying and/or administrative cost incurred in fulfilling my requests to the extent permitted by Georgia Law. Cost may be associated with your records request for both inspecting and receiving copies. Such costs include copying charges of \$.10 per page and administrative charges not to exceed the prorated of the lowest paid full-time employee who, in the discretion of the custodian of the records, has the necessary skill and training to perform to the request. The first 15 minutes of administrative cost are free. 50-18-71(c) (1)

If there are any questions about my request, I may be contacted at _____.

Or by e-mail at: _____.

Name (Print): _____

Date: _____

Signature: _____

This Open Records Request authorizes a charge of up to \$25.00. Request over \$25.00 require pre-authorization. Request over \$500.00 require pre-payment. All fees associated with request must be paid regardless of failure to pick up request. Non-payment will result in collection and impact all future requests. 50-18-71 (c) (3) 50-18-71(d)

PLEASE PRINT AND MAIL, FAX OR E-MAIL TO ATTN: OPEN RECORDS CUSTODIAN (info below)

Records Custodian Signature: _____

Date of Official Receipt: _____