



REQUEST to INSPECT PUBLIC RECORDS (please print or write clearly)



Date:

Requester:

_____ Name

_____ Street / Mail Address

_____ City, State, Zip Code

_____ Telephone

I would like to inspect the following document(s):

I would like to request a copy of the following document(s):

If the City of Aztec does not maintain these public records, please let me know who does, and include the proper custodian's name and address.

I agree to pay \$.50 per page for copying charges. If the copy charges will exceed \$5.00 please call me to discuss. I understand that I may be asked to pay the fee for copies in advance before the City of Aztec makes any copies. I also understand that I may be charged for the time it takes to copy documents. I will be provided a receipt upon request. **(Note:** copy charges may differ depending on item and size of page item).

Thank you for your prompt attention to this matter.

Printed Name: _____

Signed: _____
(Signature of Requester)

Approved: _____
(Karla H. Saylor, City Clerk)