



Data Request Form



Requester Complete Items 1-7:

1. DATE OF REQUEST	REQUESTER NOTES: A. Identification is not required for public data; Contact information is required for us to be able to provide the requested data. B. Identification is required for release of private or nonpublic data. C. <u>You must have the complete name and date of birth if you are requesting a background check on an individual.</u> D. Disclosure of information depends on the data requested and the status of any related case or investigation. E. The City may require pre-payment or may provide a phased response depending on the request.
2. REQUESTER NAME <i>(Last, First, Middle)</i>	
3. ADDRESS	
4. PHONE (Home/Cell)	
5. EMAIL ADDRESS	
6. DESCRIPTION OF DATA REQUESTED	<input type="checkbox"/> Inspection <input type="checkbox"/> Copies <input type="checkbox"/> Both Inspection and Copies
7. SIGNATURE	

To Be filled out by the City:

REQUEST TYPE: <input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Phone	REQUESTED BY: <input type="checkbox"/> Subject of data <input type="checkbox"/> Not Subject of data
DATA REQUESTED IS CLASSIFIED: <input type="checkbox"/> Public <input type="checkbox"/> Private/Nonpublic <input type="checkbox"/> Confidential/Protected Nonpublic	
RESPONSE (provide notes for checked boxes) Clarification Requested: _____ Pre-payment: _____ Estimated Cost: _____ Phased Response: _____	
REQUEST <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved in Part <i>(explain in REMARKS)</i>	REQUEST HANDLED BY: _____
REMARKS: Not Public Data Has Been Removed. Mailed _____ Faxed _____ In Person _____	ADDITIONAL REMARKS: _____
PAYMENT DUE: _____ PAYMENT RECEIVED: _____	