CITY OF PRIOR LAKE
INFORMATION DISCLOSURE REQUEST
Minnesota Government Data Practices Act
Minnesota Statutes Chapter 13

Completed by Requester:

REQUESTER NAME (Last, First, Middle):	DATE OF REQUEST:
STREET ADDRESS:	PHONE NUMBER:
CITY, STATE, ZIP CODE:	SIGNATURE:

DESCRIPTION OF THE INFORMATION REQUESTED:

REQUEST FOR: PLEASE CHECK ONE
☐ **View Information Only**
☐ **Copies of Information****
☐ **View Information Prior to Requesting Copies**
**THE CITY WILL PROVIDE ELECTRONIC DATA WITH NO COPY FEE. REQUESTS FOR PAPER COPIES OF INFORMATION INCLUDE A COPY CHARGE OF 25¢ PER PAGE.

Completed by Department:

DEPARTMENT NAME:	HANDLED BY:
INFORMATION CLASSIFIED AS: ☐ PUBLIC ☐ NON-PUBLIC ☐ PRIVATE ☐ PROTECTED NON-PUBLIC ☐ CONFIDENTIAL	ACTION: ☐ APPROVED ☐ APPROVED IN PART (EXPLAIN BELOW) ☐ DENIED (EXPLAIN BELOW)
REMARKS OR BASIS FOR DENIAL INCLUDING STATUTORY CITATION:	
PHOTOCOPYING CHARGES: ☐ NONE ☐ _____PAGES X $.25=_____ ☐ Special Rate: _____ (attach explanation)	IDENTITY VERIFIED FOR PRIVATE INFORMATION: ☐ IDENTIFICATION: DRIVER'S LICENSE, STATE ID, etc. ☐ COMPARISOON WITH SIGNATURE ON FILE ☐ PERSONAL KNOWLEDGE ☐ OTHER: _____
AUTHORIZED SIGNATURE:	