



Data Request Form

Requester Complete Items 1-7:

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

To Be filled out by the City:

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