

LOG NUMBER _____

OPEN RECORDS REQUEST FORM

DATE RECEIVED: _____ DATE FOR RESPONSE: _____

DOCUMENTS REQUESTED: _____

(ONE ADDRESS PER FORM)

(REQUEST NEEDS TO BE AS SPECIFIC AS POSSIBLE- EX: ADDRESS, TYPE OF NOTICE (HOUSING, NUISANCE, SIDEWALK, OR OTHER) DATE OR TIME FRAME, OPEN ONLY, CURRENT VIOLATIONS ONLY, EVERYTHING, ETC.)

DATE OF NOTICE/ORDER (IF KNOWN): _____

NAME OF REQUESTOR: _____

(PLEASE PRINT)

(SIGNATURE): _____

ADDRESS YOU WISH RESPONSE TO BE MAILED TO: _____

ACCORDING TO KRS 61.880(1) PUBLIC AGENCY MUST RESPOND TO THE APPLICATION IN WRITING; TO THE PERSON MAKING THE REQUEST; WITHIN THREE (3) DAYS, (EXCEPTING SATURDAY, SUNDAY AND LEGAL HOLIDAYS)

ADDRESS: _____

CITY, STATE & ZIP: _____

PHONE NUMBER: _____

RECEIVED BY: _____