



**PUBLIC RECORDS REQUEST FORM**

This Public Records Request Form is used to record the formal request for an inspection of public records in the custody of the Town of Timnath. Upon completion by the requesting party, the Public Records Request Form will be retained.

**REQUESTOR'S INFORMATION**

Date of Request: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Detailed Description of Document(s) Being Requested**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Response time pursuant to the Colorado Open Records Law: 24-72-203** – The date and hour set for the inspection of records not readily available at the time of the request shall be within a reasonable time after the request. As used in this subsection (3), a “reasonable time” shall be presumed to be three working days or less. Such period may be extended if extenuating circumstances exist. However, such period of extension shall not exceed seven working days. A finding that extenuating circumstances exist shall be made in writing by the custodian and shall be provided to the person making the request within the three-day period.

**Access to and Denial of Records pursuant to the Colorado Open Records Law: 24-72-305.5** – Records of official actions and criminal justice records and the names, addresses, telephone numbers, and other information in such records shall not be used by any person for the purpose of soliciting business for pecuniary gain. The official custodian shall deny any person access to records of official actions and criminal justice records unless such person signs a statement which affirms that such records shall not be used for the direct solicitation of business for pecuniary gain.

By signing this form, I acknowledge that I have read and understand the above Colorado Revised State Statutes. I am not requesting official action or criminal justice records for the purpose of solicitation of business for pecuniary gain.

Requestor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Internal Use Only**

<b><u>ACCEPTANCE</u></b>	<b><u>DENIAL</u></b>	<b><u>PAYMENT</u></b>
Date Received:	Date:	Amount Due:
Date Completed:	Reason:	Amount Paid: