Request for Inspection and/or Copying of City Records

In accordance with CMC Title 3, Chapter 3.15, requests to inspect or copy City records must be submitted in writing to the City Clerk. If the City Clerk denies your request, you will be notified in writing within ten working days. If denied, you will have another ten working days to appeal to the City Manager. Otherwise, unless the City Clerk notifies you earlier, you may obtain the requested inspection or copying eleven working days after you submit your request and upon payment of applicable fees.

Name of Requestor: _____

Mailing Address: _____

City/ State/ Zip Code: _____

Cell Phone Number: _____ Email Address: _____

Specific Records Requested: _____

_____

_____

I, _____, hereby certify that I am not requesting these records in connection with any pending litigation in which I am involved, and I am not requesting these records in order to provide them to any other person who is involved in any pending litigation. I also hereby agree to pay any fee for the retrieval or copying of the records as required in Title 3, Chapter 3.15 of the Cordova Municipal Code.

Signature: _____ Date: _____

City Clerk's Use

Approved: _____ Date Requestor was Notified: _____

Date Records were Inspected/Copied : _____

Denied: _____ Date Requestor was Notified: _____

Means of notification (mail / phone / email / other) : _____

City Clerk's Signature : _____

reason for denial and copy of appeal process on reverse

City Clerk's Use

Denial of Request for Inspection and/or
Copying of City Records and Appeal to City Manager

The City Clerk has denied your request to inspect/copy City records for the reason stated below. You have ten working days from the date you are notified of this denial to appeal to the City Manager. If the City Manager grants your appeal, you may obtain the requested inspection or copying three working days after the appeal is granted and upon payment of applicable fees. If the City Manager denies your appeal, you must appeal to the State Court within thirty days.

Clerk's reason for denial: _____

_____

Appeal to City Manager

I hereby appeal the denial of my record's request to the City Manager.

Signature: _____ Date: _____

City Manager's Use

Appeal is: _____ Granted _____ Denied

Reason: _____

_____

_____

Manager's Signature: _____ Date: _____

City Clerk's Use

Date Requestor was notified of City Manager's Decision: _____

Means of notification (mail / phone / email / other) : _____

Date Records were Inspected/Copied : _____

Clerk's Signature : _____ Date: _____