



CENTERVILLE CITY GOVERNMENT RECORDS REQUEST FORM

All government records of Centerville City are maintained, classified, and subject to access in accordance with the Utah Government Records Access and Management Act (GRAMA), as set forth at Utah Code Ann. §§ 63G-2-101, et seq., as amended. If you have any questions regarding this form, you are encouraged to contact the City Recorder or the City Attorney at phone number 801-295-3477. Pursuant to applicable provisions of GRAMA, this Government Records Request is a public document. Please submit this form to the City Recorder, Centerville City Hall, 250 North Main Street, Centerville City, Utah 84014.

Please note the more specific and narrow your request, the easier it will be for the City to quickly and effectively respond to your request. Failure to describe the records sought with reasonable specificity may result in delay or denial of the request.



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Name _____

Address _____

Phone Number _____ Email _____

Description of requested records (records must be described with reasonable specificity, use add'l pages if needed)

- I would like to inspect the records (free of charge, during regular business hours)
- I would like to receive hard copies of the records. I understand I will be responsible for copy and compiling fees. I authorize costs of up to \$ _____
- I would like to receive electronic copies of the records. I authorize costs of up to \$ _____

If the records requested are not public, please explain why you believe you are entitled to access. Please attach documentation or authorization, as applicable.

- I am the subject of the record (Photo ID required)
- I am the parent or legal guardian of a minor who is the subject of the record (Photo ID required)
- I am authorized to have access by the subject of the record (attach notarized Consent for Release Form, or proof of power of attorney)
- I am the person who provided the information (Photo ID required)
- Other _____

Signature _____ Date _____

OFFICE USE ONLY

Date received _____ Date due _____ Date notified of cost _____

Fees \$ _____ Date Filled _____ Date referred to another org _____

Denial (Reason and date requester notified) _____

City Recorder Signature _____ Fees waived by _____