



CITY OF GARDEN CITY

6015 Glenwood Street ■ Garden City, Idaho 83714
 Phone 208/472-2900 ■ Fax 208/472-2996

REQUEST TO EXAMINE/COPY PUBLIC DOCUMENTS

TO: CITY OF GARDEN CITY, IDAHO

DATE OF REQUEST: _____

Please select which departments you would like to search for the requested public documents:

- | | | |
|---|--|---|
| <input type="checkbox"/> Mayor's Office (incl. City IT) | <input type="checkbox"/> City Library | <input type="checkbox"/> City Clerk |
| <input type="checkbox"/> City Police Dept. | <input type="checkbox"/> City Attorney | <input type="checkbox"/> City Treasurer |
| <input type="checkbox"/> City Public Works | <input type="checkbox"/> City Development Services (Building/Zoning) | |

Pursuant to Idaho Code § 74-102, I hereby request to examine and/or copy the following public record(s). **Requests should specifically describe the subject matter and records sought:** including a specific date range for when the records sought were created. The requesting party shall be as specific as possible when requesting records. A request shall describe records sought in sufficient detail to enable the public body to locate such records with reasonable effort. Please list or identify specific names of documents, report numbers, or tracking references.¹

- I merely wish to examine these records.
 (will occur at a time mutually convenient if request requires more than thirty minutes of staff time)
- I wish to have copies of these records received by:
- | | |
|---|--|
| (to prevent alteration of the public record, Garden City does <u>not</u> provide copies of paper records by e-mail) | <input type="checkbox"/> In person pickup (no delivery cost) |
| | <input type="checkbox"/> Mail (actual delivery cost) |
| | <input type="checkbox"/> Fax (actual delivery cost) |

Name of Requesting Party:	E-mail address:		
Mailing Address:	State:	Zip:	
Phone # ()	Fax # ()		

I acknowledge by my signature that I will pay for all applicable material, labor, and delivery costs, and that the records sought by this request will not be used for a mailing list or telephone list as set forth in Idaho Code § 74-120.

Signature _____

Do Not Write Below This Line – For Official Use Only

Request Received By:	Date & Time Received:	Date Request Fulfilled:	
Received by Records Supervisor or Custodian of the Records	Received By:	Date:	
Reviewed/Released by Attorney or Department Records Manager	Reviewed By:	Date:	
Approved for Release: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> Denied	Extension Letter: <input type="checkbox"/> Yes <input type="checkbox"/> No	Est. Cost Bill: <input type="checkbox"/> Yes <input type="checkbox"/> No	Final Cost Bill: <input type="checkbox"/> Yes <input type="checkbox"/> No
Requestor Notified By: Date:	Released to Requestor By: Date:	(material/labor/deliv.) Cost to Requestor \$	
Date/Reason Re-filed:			

¹ Unless the requestor demonstrates an exemption pursuant to Idaho Code § 74-102, as determined by the City Clerk (Municipal Records Manager), the requestor shall be charged the material costs and the reasonable labor costs allowed by Idaho Code § 74-102 only if: (a) the request is for more than one hundred (100) pages of paper records; or (b) the request includes records from which nonpublic information must be deleted; or (c) the actual labor associated with responding exceeds two (2) person hours. The custodian of the public record shall require advance payment of the cost of labor and/or copying pursuant to Idaho Code § 74-102. Any money received by the City shall be credited to the account for which the expense being reimbursed was or will be charged, and such funds may be expended by the City as part of its appropriation from that fund.