



REQUEST FOR OPEN RECORDS

(To be completed by the requester)

NAME: _____ **PHONE:** _____

ADDRESS: _____

I, the undersigned, hereby certify that neither I nor any person for whom I may be acting as agent intends to and will not use any names or addresses contained in or derived from the records to sell or offer for sale any property or service to the persons or residents of the addresses listed, and will not sell, give or receive any list of names or addresses to be used for unlawful commercial purposes [See K.S.A. 45-220(c)(2)(A)(B) and K.S.A. 45-230]
I understand and acknowledge that a violation of this law is a fine of \$500 for each violation.

_____ *(initial)*

APPLICANT'S NAME: _____

APPLICANT'S SIGNATURE _____ **DATE:** _____

COPIES SOUGHT: Please provide as specific a description as possible of the records(s) you desire to inspect. Include record titles and dates, as well as the names of city agencies or departments which produced or hold the record(s):

RECORD TITLE/DATE & NUMBER OF COPIES DESIRED

- 1. _____
- 2. _____
- 3. _____
- 4. _____

INSPECTION/COPY FEE

- A) When a request has been made for inspection of any open record that is readily available to the record custodian, there shall be no inspection fee charged to the requester. A fee of \$.25 per page shall be charged for photocopying of public records. There will be no charge less than \$2.50.
- B) In all cases where inspection of any open record is not readily available, a record inspection fee shall be charged at actual cost per employee engaged in the record search.
- C) Unless other arrangements have been made with the record custodian, fees will be due on receipt of information.
- D) When prepayment is required by the record custodian, no records shall be made available to the requester until prepayment has been made.

REQUEST FOR INFORMATION *(To be completed by Record Custodian)*

Requested Date: _____ **Time:** _____ **AM/PM**

Available Date: _____ **Time:** _____ **AM/PM**

Records Custodian