



Public Records Request Form

Date of Records Request: _____

First Name: _____

Last Name: _____

Street Address: _____

Address Line 2: _____

City: _____

State: _____

Zip code: _____

Telephone: _____

Email Address: _____

Description of Record(s) Requested:

Preferred format to receive record request (electronic, paper, mail, etc.):

All public record requests will be fulfilled in a reasonable timeframe.

For Official Use Only:

Check category of request: Routine (Employee) Non-Routine (Notify VM) Significant (Requires VM Approval)

VOP Staff who filled request: _____

Date request was filled by staff: _____

Date distributed to requestor: _____

If fee for copies (\$0.10 per page) or "special service charge" is applied, list here: _____

Forward completed forms to the Village's Customer Service Representative to be recorded.