

**MORGAN COUNTY COMMISSION**  
**PUBLIC RECORDS REQUEST FORM**  
**FOR INSPECTION AND PRODUCTION OF RECORDS**

THE FOLLOWING MUST BE COMPLETED

REQUESTOR'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
(Please Print Legibly)

ADDRESS \_\_\_\_\_ CITY/ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ ORGANIZATION \_\_\_\_\_

REQUESTED INFORMATION IS TO BE : Picked Up: \_\_\_\_\_ BY: \_\_\_\_\_

Mailed: \_\_\_\_\_ E-Mailed: Must Supply Email Address: \_\_\_\_\_

**SPECIFIC INFORMATION REQUESTED: (May include additional pages if needed)**

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**REASONS FOR INFORMATION REQUESTED:**

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**COSTS:** The County is permitted by law to recoup reasonable costs incurred in providing public records which can include retrieval, research, and duplication and preparation time. The requestor will be provided in advance with estimated cost for materials, labor, and shipping or delivery.

**INSPECTION OF PUBLIC RECORDS:** When a public inspection of records is requested, a custodian of those records must oversee inspection, retrieval, and re-filing. Appointments must be scheduled in advance. A labor charge will be imposed as set out herein. Any and all requests must be submitted in writing on the adopted form.

**MATERIALS:** The cost of copies sized 8.5x11 or 8.5x14 inches is 50 cents per page. Charges for maps, plats, and other large documents are set by the applicable department. Fees are due whether the records are provided by paper, email, or via pdf-file. The fee for records provided by DVD is \$10.00.

**LABOR:** No labor charge is imposed when a nominal amount of staff time is needed to respond to a request. Charges for requests requiring more than 15 minutes of staff time are based upon the hourly base rate of pay for the least-paid employee of the applicable department who can respond to the request, multiplied by the actual time worked, and is computed on the basis of quarter hours, rounded up. Labor charges are in addition to the per page or per DVD costs specified above and are due and payable even if no records responsive to the request are located, or in the event the requested records are subsequently determined to be exempt from disclosure.

**DEPOSIT:** A deposit of \$50.00 is required when the Office of the County Commission determines that more than one (1) hour of staff time will be needed to respond to a request. If the final cost is less than the deposit, the difference will be refunded; if greater, the additional cost must be paid prior to delivery or review of the records.

**FORM OF PAYMENT:** Deposits and final costs for records may be paid by cash, cashier check, or money order. Checks, credit and debit cards are not accepted. If payment is made by cash, the exact amount is required. Costs must be paid before records will be released.

REQUEST RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DEPARTMENT REQUEST ROUTED TO: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE INFORMATION DELIVERED: \_\_\_\_\_

BY: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_