Crowley County Public Records Request Form

The following request is made under the Colorado Open Records Statute

Printed Name:	
Organization represented (if any):	
Mailing Address:	
Phone Number:	Email Address:
Inspection prior to requesting copies: YES / NO	Request for copies in lieu of inspection: YES / NO
Name or identification of record(s) requested:	
(include date of issuance and location of document of which seeks voluminous records, may cause a delay in Please attach an additional page if necessary to list the If the records are available pursuant to C.R.S. § 24 within three (3) working days of the County's circumstances exist such that the custodian cannot reday period, the period shall be extended for seven (4 the extension within the initial three (3) working-day. When records are paperless and not accessible from not limited to electronic mail and other digitally store. In such cases, the Requester will be informed and conherein. The fee for copies of records produced by the Counts \$1.00 for 11 x 17 size page. The Requester will also will be imposed for the first hour of time expended thour, a fee of \$41.37 per hour will be charged for eand retrieval. Full payment of all fees must be received records. Please requests involving voluminous research will be collected before work starts.	1-72-201 et seq., the records will typically be made available receipt of this completed form. However, if extenuating easonably assemble the records within this three (3) working 7) additional working days. The Requester shall be notified of
Date:	Signature:

crowleyadmin@crowleycounty.net.			
FOR OFFICIAL USE ONLY			
Records request received by:	<u>Date:</u>		
Time spent by staff researching, retrieving, redacting, and o	copying the requested documents:	_	
No. of pages (where copies provided):			
Cost of research, retrieval, redacting and copying: \$			