



COASTSIDE COUNTY WATER DISTRICT PUBLIC RECORDS REQUEST FORM

REQUESTER INFORMATION:

Requester Name:

Date:

Mailing Address:

City, State & Zip

Phone:

E-Mail Address:

REQUEST TO INSPECT RECORDS

REQUEST FOR COPIES

DESCRIPTION OF RECORDS(S) REQUESTED:

(Please be as specific as possible, include dates, titles of reports, etc...)

MAIL COPIES

WILL PICK UP COPIES

ELECTRONIC (if available), Please email to: _____

HARD COPY (\$.06 per page duplication cost per CCWD Resolution Number 2001-03 Dated March 27, 2001) - \$.12 per page double-sided (*Postage costs are additional*)

I understand that, in addition to other fees permitted under the California Public Records Act, there is a charge for the direct cost of duplication of all material. I agree to pay all charges before receiving any records.

Requester Signature:

Date:

Please make check or money order payable to: **Coastside County Water District**

This form can be mailed or submitted in person to: Coastside County Water District, 766 Main Street, Half Moon Bay, CA 94019 or fax to (650) 726-5245

California Public Records Act, Government Code Section 7920 *et. seq.*

7922.530 (a). Except with respect to public records exempt from disclosure by express provisions of law, each state or local agency, upon a request for a copy of records that reasonably describes an identifiable record or records, shall make the records promptly available to any person upon payment of fees covering direct costs of duplication or a statutory fee if applicable. Upon request, an exact copy shall be provided unless impracticable to do so.

7922.535 (a). Each agency, upon a request for a copy of records, shall, within 10 days from receipt of the request, determine whether the request, in whole or part, seeks copies of disclosable public records in the possession of the agency and shall promptly notify the person making the request of the determination and the reasons therefore.

FOR OFFICE USE ONLY:

Date Received: _____ By: _____

Amount Due: \$ _____ Paid Date: _____

Date Completed: _____ By: _____