## CHARLESTON TOWN GRAMA RECORDS REQUEST FORM

To the Charleston Town Clerk's Office, 3454 W. 3400 S. - Charleston, UT Description of records sought (records must be described with reasonable specificity): Choose one: I would like to inspect (view) the records. I would like to receive a copy of the records. I understand that I may be responsible for fees associated with copying charges or research charges as permitted by UCA 63G-2-203. I authorize costs of up to \$ UCA 63G-2-203 (4) encourage agencies to fulfill a cords request without charge. Based on UCA 63-G-2-203 (4), I am requesting a waiver of costs because: I am the subject of the record. I am the authorized representative of the subject of the record. My legal rights are directly affected by the record and I am impoverished. П (Please attach information supporting your request for a waiver of fees.) If the requested records are not public, please explain why you believe you are entitled to access. I am the subject of the record. I am the person who provided the information. I am authorized to have access by the subject of the record or by the person who submitted the information. Documentation required by UCA 63-G-2-202, is attached. Other. Please explain: \_\_\_\_\_ I am requesting expedited response (Please attach information that shows your status as a member of the media and a statement that the records are required for the story for broadcast or publication; or please attach other information that demonstrates that you are entitled to expedited response under UCA 63-2-204 (3). Desired format for records 

Printed copy in person 

Printed copy mailed to the address below □Fax # \_\_\_\_\_ □Email \_\_\_\_ My name is: \_\_\_\_\_ My address is: \_\_\_\_\_ City, State Zip: Telephone #s \_\_\_\_\_\_ \_\_\_\_

Signature: Date: