

PUBLIC RECORDS REQUEST FORM Tuolumne City Sanitary District

Request for Public Records

Under the California Public Records Act, members of the public have the right to inspect and obtain copies of most records maintained by the District. This form may be used to request identifiable records. The District will respond as promptly as possible and will either provide the records or explain any applicable exemptions.

Important: The District generally has 10 calendar days to determine whether the requested records are disclosable and to notify you of that determination. Additional time may be needed to locate and produce the records. Reasonable costs of duplication (and, in some cases, staff time for extensive research) may be charged to the requester.

Please describe the records as precisely as you can. Including dates, document titles, resolution or ordinance numbers, or other identifying details helps the District locate the materials efficiently. Vague or overly broad requests may result in delays, additional research fees, or a request that you narrow the scope.

REQUESTER INFORMATION

Full Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

RECORDS REQUESTED

Please list the specific records you are requesting (include titles, dates, or other identifying information):

Preferred format (circle one): Paper copies Electronic (email/PDF) Inspection only

Signature: _____ Date: _____

FOR DISTRICT USE ONLY

Date Received: _____ Response Due / Sent: _____

Estimated Cost: \$ _____ Deposit Received: \$ _____ Balance: \$ _____

Disposition / Notes: _____
