



3301 Carmen Ave.
 Rancho Viejo, TX 78575
 Ph: (956) 350-4093
 Fax: (956) 350-4156
 ranchoviejotown@aol.com

INFORMATION REQUEST FORM

I the undersigned hereby formally request from the Town of Rancho Viejo, Texas, the following items of public information. I hereby agree to comply with the provisions of the Government Code, Chapter 552, Open Records Act, as may be amended from time to time.

1. INFORMATION REQUESTED

Be specific in your request – Whenever possible give dates.

2. Requesting access to view copies/files only

Requesting actual copies (\$.10 ea)

Accident Reports - \$5.00 + (\$.10/addt'l copy)

Print Name

Signature

Mailing Address

Telephone Number

City/Zip code

Date of Request

The Town shall make every reasonable effort to grant access to or make copies of its public records as soon as possible. Time, workload and access restraints may cause reasonable delays in producing the requested document or copies, but in no event shall the delay be in excess of ten (10) business days unless the reasons are given in writing and a specific date and time for access or copies is stated.

FOR OFFICE USE ONLY

Received by: _____ Fwd to: _____ Date: _____

Person Providing Information: _____ Time Spent: _____ No. of Copies: _____

Information provided: \$0.10 per copy X _____ copies \$ _____

Audio files \$1.00 per file X _____ copies \$ _____

Staff Time \$15.00 per hour X _____ \$ _____

TOTAL COST \$ _____

Town Administrator must approve documents to be produced for inspection or copies before giving to the public.

Approval Signature _____

Date _____