REQUEST FOR PUBLIC RECORD
VILLAGE OF ASHLEY

Name: ___________________________  Request:  
                    _Written
                    _Electronic

Address: ___________________________

Phone: ___________________________  Date Filed: __________

I request to have the public record(s) supplied to me in the following form:  Inspection___  Copies___

Name and brief description identifying public record desired:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

PAYMENT MUST BE RECEIVED PRIOR TO DELIVERY OF PUBLIC RECORDS

Will pick up ___  Please mail to the address above ___  
List alternate address, if applicable ___________________________

I understand a public body must respond to my request within (5) business days after it is received. The public body must grant or deny all or a portion of my request, or issue a notice extending for (10) business days, the period in which the public body must respond to my request. In place of these deadlines, I agree to allow the public body a reasonable time to process my request.

________________________
Signature

Office Use Only

Costs: In advance (over $50.00)

Estimate ________________
(-) 50% ________________

Amount Due $ ________________

Date Available: ________________

Request Number: __________________

Final Account:
Mailing ________________
Labor ________________
Copies @ .10 ________________
Other ________________
Total ________________
(-) Deposit ________________
Amount Due $ ________________