## **City of Yuma Open Records Request Form**

The following request is made under the Colorado Open Records Act:

	Date:				
		Time	:	a.m./p.m.	
Name:		Company:			
Address:		City:		State:	Zip:
Phone:	Fax:		Cell:		
Email:					
Name of document(s)	requested:				
If the document nar information requested			_	_	
If the records are read produced within 3 wo If extenuating circum within the 3-day period The requestor shall be at 320 S. Main Streinspection, photocopi for at the time the requestors.	orking days (date of reastances exist so that od, the Custodian may e notified of the extendet, Yuma, Colorado es may be requested	equest is not indent the Custodian y extend the persion within the persion on regular to for \$0.25 per	cluded in canot re riod by up to 3-day peri ousiness da standard	alculating the reasonably gather of additional od. Records slays by appoint page. Charges	esponse date). er the records working days. hall be viewed tment. After s must be paid
Signature		_	Date		
For Official Use (	Only				
DEPARTMENT/CUS	STODIAN OF RECC	ORDS:			
	thour free, every hou staff in assembling t ch and assembly of re	the records requ	iest.		
Research Records req	uests received by:				
City Clerk			——— Date		