

# OCONEE COUNTY BOARD OF COMMISSIONERS

## OPEN RECORDS REQUEST FORM

(To be completed, signed and dated by person making request)

1. Provide your name, address, telephone number and e-mail address:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

2. Identify the County Department or Official to whom this request is submitted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. State whether you wish to inspect and/or obtain photocopies of the requested records:

\_\_\_\_\_  
\_\_\_\_\_

4. Identify the specific records covered by this request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Signature

### NOTICE

Some public records are exempted from disclosure by law. You will be notified within three (3) business days if the record sought is a public record available for inspection, and you will be notified when the record will be available for inspection and/or copying. You will be charged \$.25 for each page of our records you request to have copied, and may be charged an additional fee for certified copies or for other copies for which a fee is specifically authorized or otherwise provided by law. In addition, you may also be charged a reasonable fee for search, retrieval, and other direct administrative costs if your request necessitates an unusual administrative cost or burden.

Department Results:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date and Initials: \_\_\_\_\_