



OPEN RECORDS REQUEST

FROM: _____ DATE: _____
(Print Name of Requestor)

Pursuant to the Georgia Open Records Act (O.C.G.A. § 50-18-70 et seq.); I am requesting the following records (please be specific):

No Open Records Request is required to be in writing; however, use of this form will assist the City of Rome staff member to fulfill the request as accurately as possible. Information will be provided within three (3) business days of the date of this request.

I understand that pursuant to O.C.G.A. § 50-18-71, I may be charged administrative and copying fees for the cost to search, retrieve, copy, redact, and supervise inspection of the requested documents. The fee for copying is generally \$.10 per letter or legal-size page unless otherwise provided by state law. In the case of other documents, I understand that I may be charged the actual cost to produce such documents. In addition, the hourly rate of the lowest paid full-time employee with the necessary skill and training to respond to my request will be charged after the first 15 minutes. **If payment is applicable, I agree to pay all copying and administrative costs incurred in fulfilling my open records request. Check one: Yes ___ No ___**

(Signature of Requestor)

| <u>For Official Use Only</u> | |
|-------------------------------------|-----------------------|
| Date Received: _____ | Staff Initials: _____ |
| Total # of pages produced: _____ | |
| Total cost of production: \$ _____ | |