

CITY OF DICKINSON

Public Information/Records Request Form

Name: _	Telephone No.	0.:
Address	ss: Alternate No	:
City:		
State:	ZIP:	
Specific Record(s) Requested: (Please be as specific as possible so your request may be handled as quickly as possible)		
Please specify how you would prefer to receive the records: (Check one box)		
	PICKED UP by me or my representative when you advise the inf	ormation is ready
	EMAILED to me at:	
	MAILED to me at the address indicated above.	
	FAXED to me at: MADE AVAILABLE TO ME FOR EXAMINATION ONLY. The Reco appointment within a reasonable time for my examination of the I must complete my examination within (10) days after the date to me.	ne information. I understand that
not be i retrievii	rstand that every effort is made to expedite requests, but there immediately available. I agree to pay the costs of photocopying, ing information that is not readily available or is in need of redact nt to Texas Government Code Chapter 552.	duplication, the labor costs involved in
Signature of Requestor Date of Req		Date of Request

PUBLIC RECORDS CHARGES

Standard-Size Copy (up to and including 8.5 inches x 14 inches) reproduced by copier or computer printer a) 50 pages or less of readily available information __ \$.10 per page (+10 pgs) b) in excess of 50 pages of readily available information ___\$.85 first page \$ +.15 ea. Adtnl c) non-readily available information ___ \$ + personnel costs Nonstandard-Size Copy \$ Actual cost CD \$ 1.00 ea. DVD _____\$ 2.50 ea. Paper copy _____\$.50 ea. Personnel Charge - Prorated \$ 15.00/ hr (Not charged for 50 or fewer readily available standard size form, or time of an attorney, legal assistant, or reviewer) **Overhead Charge** \$ 20% of total Personnel Charges For non-readily available or in excess of 50 pages **Computer Resource Charge** Mainframe \$ 17.50/ minute Midrange _\$ 3.00/ minute Client/ Server \$ 1.00/ minute PC or LAN .50/ minute Remote Document Retrieval Charge ___ \$ Actual Cost **Programming Charge** _ \$ 26.00/ hr Miscellaneous Supplies Charge \$ Actual Cost (Label, boxes, and other producing supplies) Postal and Shipping Charge \$ Actual Cost Fax Charge Local \$.10/ page _\$.50/ page Long-distance – same area code \$ 1.00/ page Long-distance – different area code Inspection of Records Standard – size form 50 or less readily available ___ \$ No Charge Standard – sized form in excess of 50 readily available \$ Assessed Total Charges: Deposit (If estimated charges exceed \$100.00): ½ Charges: