

# CITY OF CONYERS

## *OPEN RECORDS REQUEST*

**Date:** \_\_\_\_\_

**Name of requestor:** \_\_\_\_\_

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

**Phone number:** \_\_\_\_\_

Pursuant to O.C.G.A. §50-18-70 et seq., I am formally requesting to inspect certain public records. In particular, records requested for inspection are: (Please be as specific as possible.)

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

**Date records are requested to be made available:** \_\_\_\_\_

-----

I agree to pay any copying and/or administrative costs incurred in fulfilling my request(s) to the extent permitted by Georgia law. Such costs may include copying charges of \$0.25 per page and administrative charges for search, retrieval, and other direct administrative costs. Charges for time are not to exceed the salary of the lowest paid full-time employee who, in the discretion of the custodian of the records, has the necessary skill and training to perform the request. (The requestor is not charged for the first fifteen (15) minutes of time.)

**Name: (please print)** \_\_\_\_\_

**Signature:** \_\_\_\_\_

*Please return this form to: City Clerk's Office – City of Conyers – 1184 Scott Street – Conyers, GA 30012.*

\*\*\*\*\*

### ***RECORD RETRIEVAL FEES***

The following record retrieval fees may be charged:

Actual time of record preparation (varies)	_____ Hours x \$	= \$
Actual time of copying (varies)	_____ Hours x \$	= \$
\$0.25 per page copy	_____ Pages x \$0.25	= \$
Postage		= \$
Other costs		= \$
<b>TOTAL COSTS</b>		<b>= \$</b>