Public Records Request Form

The following request is made under the Colorado Public Records law:

Name: _____________________________________________ Date:____________________________

Organization represented (if any):  _________________________________________________________

Address: _____________________________________________________________________________

Phone: (___ ) _______________________ Email ____________________________________

Name of document(s) requested:  __________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

If the document name is unknown, provide a brief but specific description. Include dates, type of
document, parties involved, etc. Broad, vague, or voluminous requests cause delays or may be denied.

If the records are available pursuant to law, the records will be made available for viewing within three
working days. If extenuating circumstances exist so that the Custodian cannot gather the records within
three working days, the period will be extended an additional seven working days. Please refer to the
County’s Public Records Policy for more information. The Policy is available at
www.larimer.org/transparency or at the County Manager’s Office (970) 498-7010.

Documents cost $.25 per page plus staff time, unless actual costs exceed that amount, in which case,
actual costs may be charged. All payments for public records must be received in advance of releasing
the requested records.

Print Name Signature

Filing Instructions: Email, fax, mail or deliver the completed form to the person/office whom you believe
to be the custodian of the document(s). A list of county departments is available on the County web site.

For County Use Only

Request received by: __________________________ Date/ Time:______________ Estimated Cost $_________

Actual Cost: Copies X 25¢ = $ ___________________________ Staff hours X _______ (hourly rate) = $______

Total Cost $_________ Amount Paid $_________

Date request completed ___/___/____  By _____________________________

Enclosure 1