

# Inscription Canyon Ranch Sanitary District

PO. Box 215

Chino Valley, AZ 86323

Telephone (928) 237-9347 \* Fax (928) 636-9771

## REQUEST FOR PUBLIC RECORDS

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

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

### Nature of Request:

- Opportunity to review records (no original record may leave the premises)
- Copies of records

### Please read and sign the following statement:

I have requested public records for a noncommercial purpose. I understand that if the records should be used for a commercial purpose, a verified statement of the purpose must be submitted per A.R.S. §39-121.03.

\_\_\_\_\_  
Date Signature

**Notice:** A fee of \$0.25 per page will be charged for copies. A fee of \$7.00 is charged for copies of audio tapes of Public Meetings . (Records may be mailed upon request; fee will include postage.)

**Records Request** (please be as explicit as possible as to the records you desire):

---

---

---

---

---

Mail this request to the address above or Fax to 636-9771