

## RUBIDOUX COMMUNITY SERVICES DISTRICT PUBLIC RECORDS REQUEST

To expedite your request and to eliminate opportunities for error, please fill out this form completely with as much detail as possible and identify specifically the records you are requesting. Requests should reasonably describe identifiable records prepared, owned, used, or retained by Rubidoux Community Services District ("District"). The District is not required by law to create a new record or list from an existing record. Please note that if you are requesting the opportunity to inspect records stored at this office, the District must be given time to locate and review documents that are responsive to your request in order to comply with the provisions of the Public Records Act. You will therefore be requested to make an appointment to return at a later date to view the documents. You will be charged the direct cost of duplication for any documents received. Documents will not be copied until payment has been received. Please carefully read this form for information on copying costs and other pertinent information.

## California Public Records Act:

6253. (a) Public records are open to inspection at all times during the office hours of the state or local agency, (b) each state or local agency, upon a request for a copy of records that reasonably describes an identifiable record or records, shall make the records promptly available to any person upon payment of fees covering direct costs of duplication, or a statutory fee if applicable, (c) Each agency, upon a request for a copy of records, shall, within 10 days from receipt of the request, determine whether the request, in whole or in part, seeks copies of disclosable public records in the possession of the agency and shall promptly notify the person making the request of the determination and the reasons therefore. 6253.4. (a) Every agency may adopt regulations stating the procedures to be followed when making its records available in accordance with this section.

Name:	_
Address:	
Telephone:	

## Email Address: \_\_\_\_

When submitting your request, please be as specific as possible. Non-specific requests may be rejected if the request requires an undue amount of research or compilation.

## Requested Records:

\_\_\_\_ I would like to inspect the requested records, where applicable, and do not want copies produced at this time.

\_\_\_\_ I would like copies of the requested records and I understand that I will be contacted with a count of the number of pages to be copied and their cost prior to copying. I will pay copying costs for documents requested of \$.10 per page.

\_\_\_\_ I would like the requested records to be emailed to the email address provided.

I understand that the District has 10 days to respond to this request to determine whether it encompasses disclosable public records and will notify me by email.

Signature:

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