

CITY OF RAEFORD
Request for Copy of Public Records

INSTRUCTIONS: This form must be completed by the individual who is requesting a copy of any public records of the City of Raeford. This form should be submitted to the individual who maintains the specific records in question who will copy the City Manager upon receipt. Please refer to the NC State Public Records Law, Chapter 132 of the NC General Statutes for more information.

Requestor's Name: _____ **Representing:** _____

I, the undersigned, am requesting copies of the following City records and agree to pay reasonable costs to recover the actual costs* of copying the following:

**NOTE: actual cost will be determined by such factors as: if the requestor runs copies on the City's copier, if City personnel must make the copies for the requestor, if the copies must be certified, if the copies are in electronic data form, if they are "special case" copies (oversized maps, high resolution copies, color copies). If requested information is to be mailed, postage and shipping charges will be the direct costs charged by the US Postal Service.*

Records of criminal investigations & criminal intelligence information and confidential 911 database is confidential and is not public record as defined by G.S. 132-1.

AGREEMENT: By signing below; requestor agrees that the copies supplied will not be resold or otherwise used for trade or commercial purposes.

Printed Name of Requestor

Date of Request

Signature of Requestor

Complete Address of Requestor: _____

Phone #

RECORD OF PAYMENT

OF IMPRESSIONS _____ X \$ _____ * = \$ _____ (processed by: _____) (date)

(ATTACH RECEIPT HERE)

**per City fee schedule for copies*

cc: Department Head
City Manager

Request Copy of Public Records/Forms