

Prairie City - City Hall

Request for Release of Information



REQUESTING PARTY INFORMATION

Date of Request: _____ Name: _____

Mailing Address: _____
Street or POBox City State Zip code

Agency/Company _____ Phone: _____ Fax: _____

Email: _____

REQUESTED INFORMATION/DOCUMENTATION

Please be as detailed as possible; include names, dates, subjects, meeting dates, resolution and ordinance numbers, project names, etc.

Other specific information needed or information that may help in filling request:

How to Receive Information and Fee Schedule

Paper Copies - \$.25 per page

Photos/4 per page - \$5.00

Flash drive - \$5.00

Video/Audio CD or DVD - \$30.00

Postage for mailed copies -Actual cost

Faxed copies: Local/toll free - \$0.50/page
Long distance - \$1.00/page

Although the records that I am requesting may be deemed to be "public records" within the meaning of Chapter 22, Code of Iowa, I understand that my use of this information must comply with all local, state, and federal laws including but not limited to laws relating to privacy, harassment, discrimination, debt collection, libel, slander, and tort. Misuse of said information by me in violation of the law is exclusively my responsibility. The City of Prairie City denies any and all responsibility of how this information is used by me. If any third party makes a claim against the City of Prairie City for misuse of this information attributable to me, the City of Prairie City shall pursue all available legal remedies against me. I certify that I may be charged for costs related to the inspection/copying of public records, and the records will not be related to me without payment.

Signature of Requestor

Date of Request