Town of Berry

Open Records Request Form

Please fill out this form if you are requesting an inspection or photocopies of public records.

Public records may be requested, inspected and copies obtained during normal business hours of Monday through Friday, 7:30 AM to 4:30 PM and Wednesday, 7:30 AM to 11:00 AM. In some cases, records may require retrieval and therefore may not be immediately available for inspection. Every effort will be made to respond to the open records request as soon as is practicable and without delay.

The cost of photocopying of records shall be .25 cents per side of page, which has been calculated to be the actual, necessary and direct cost of reproduction. In some cases, such response costs may go beyond simply copying a requested record. In these cases, the Records Custodian may charge for any and all costs associated with complying with an open records request up to and including applicable shipping, mailing and hourly wages of Records Custodian or designee thereof. Per 19.35(3)(f) Wisconsin Statute a prepayment of such costs associated with an open record request in access of $5.00 may be required prior to processing such open records request.

REQUESTOR'S INFORMATION *(Please Print)*

Name: _____
First Name *Middle Initial* *Last Name*

Group: _____
Company Name or Group Affiliation

Address _____
Route or P.O. Box Number

_____
City *State* *Zip Code*

Preferred Contact

Phone: ☐ _____

Fax: ☐ _____

Email: ☐ _____

Document to be ☐ Picked Up ☐ Mailed

Document Requested _____
Attach additional sheet if necessary.

_____

Reason Requested _____

Acknowledgement that Requester Inspected or Received A Copy of Document Requested.

_____
Signature ***Date***

Please allow at least 10 days for information to be researched. Your request will be given priority and you will be notified as soon as the records requested are available for your inspection or release. Records will be available for pick up for 7 days from completion contact date.

Any information given orally or in writing by Town Officials may be subject to errors or omission and shall not be a binding liability upon the Town of Berry.

MUNICIPAL RECORDS USE

Date Stamp When Received:

Time Received: ____:____ AM PM

Received By: _____

Date Completed: _____

Time Completed: ____:____ AM PM

Access to Documents: ☐ Approved ☐ Denied

Records Custodian:

_____
Signature *Date*

No. of Pages_____ Fees Received: $_____
(Attach Paid Invoice or Receipt)

Remarks/Actions:_____

_____

_____

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