



**Request for Records
Pursuant to the Colorado Open Records Act**

Date of Request: _____ Time: _____

Name: _____

Mailing address: _____

Telephone Number (daytime): _____

Specific description of the record desired:

(Signature)

Please note the City of Steamboat Springs has an Administrative Regulation relative to Open Record Requests (Resolution 2007-39). The first four pages are free, per requester, annually; and additional pages are \$.25 each. FAX Copies \$.25 per page; Duplication of Audio Tapes/Mini Discs \$30.00 item.

****NON-REFUNDABLE DEPOSIT FOR ALL REQUESTS ESTIMATED TO BE \$50.00 OR MORE. PAYABLE IN ADVANCE \$25.00 PER \$50.00 REQUEST.****

(Do not write below this line - this section to be completed by the City Clerk)

Response Date: _____ Response Time: _____

Method of delivery: _____

Number of pages: _____ Amount Paid: _____

By: _____

Denial of request and basis for denial:

Pursuant to the Colorado Open Records Act, the City (C.R.S. 24-72-203) of Steamboat Springs has 72 hours in which to respond to this request. If the request is large, an extension of seven (7) working days is permitted.