



City of LaBelle
 481 W. Hickpochee Avenue
 LaBelle, Fl. 33935

PUBLIC RECORDS REQUEST FORM

1. There is no charge to review public records unless the nature or volume of the material requested requires extensive assistance. To ensure that the documents will be readily available when you come to City Hall, we recommend that you make an appointment with the City Clerk.
2. Pursuant to Chapter 119, F.S., copies of records shall be furnished (with reasonable time to respond) upon payment of the fee prescribed by law. There will be service fee charged (employee labor cost) for any searching and copying of documents that extends beyond fifteen (15) minutes connected to fulfilling your public records request.

Date: _____

Name/Company : _____ Phone No. _____

Address: _____ Fax No. _____

City, State, Zip: _____ Email: _____

TYPE OF RECORDS REQUEST/FEEES:

- _____ Hard Copy up to 11" x 17" (\$.15 per page/one-sided copy)
- _____ Hard Copy up to 11" x 17" (\$.20 per page/two-sided copy)
- _____ Hard Copy 24" x 36" (___ \$4 – B&W or ___ \$40-Color per page)
- _____ Hard Copy 36" x 42" (___ \$8 – B&W or ___ \$80-Color per page)
- _____ Certification of documents (\$1.00 per page)

For all other copies, the cost will be actual cost of duplication of the public records.

Request Description: (i.e. Ordinance/Resolution No., Commission/Board Minutes, Personnel Records, etc.)

Signature of Requestor: _____

Official Use Only:

Department(s) to Compile Request: _____

Date Compiled: _____ Completed by: _____

Date forward to City Clerk (if applicable): _____

Records Produced/Comments: _____

_____ Date Copies were mailed or

_____ Date Requestor notified to pick-up records by

Public Records Request Fees:

of Copies: _____

Cost of Duplication: _____

Postage (if applicable): _____

Total Cost: \$ _____

Make checks payable to the City of LaBelle

Records Released By: _____

Records Released To: _____

Date: _____