

CITY OF PROCTOR
Data Request Form

REQUESTER COMPLETE Items 1-7

1. DATE OF REQUEST	
2. REQUESTER NAME (<i>Last, First, Middle</i>)	REQUESTER NOTES: A. Identification is not required for public data; Contact information is required for us to be able to provide the requested data. B. Identification is required for release of private or nonpublic data. C. <u>You must have the complete name and date of birth if you are requesting a background check on an individual.</u> D. Disclosure of information depends on the data requested and the status of any related case or investigation. E. The City may require pre-payment or may provide a phased response depending on the request.
3. ADDRESS	
4. PHONE └ Home # └ Cell #	
5. EMAIL (if applicable)	
6. DESCRIPTION OF DATA REQUESTED copies <input type="checkbox"/> Inspection <input type="checkbox"/> Copies <input type="checkbox"/> Both inspection and	
7. SIGNATURE	

To Be filled out by the City:

REQUEST TYPE: └ In-person <input type="checkbox"/> Mail <input type="checkbox"/> Phone	REQUESTED BY: └ Subject of data <input type="checkbox"/> Not Subject of data
DATA REQUESTED IS CLASSIFIED: └ Public <input type="checkbox"/> Private/Nonpublic <input type="checkbox"/> Confidential/Protected Nonpublic	
RESPONSE (provide notes for checked boxes) └ Clarification Requested: _____ └ Pre-payment: _____ └ Estimated Cost: _____ └ Phased Response: _____	
REQUEST └ Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved in Part (<i>explain in REMARKS</i>)	REQUEST HANDLED BY:
REMARKS: └ Not Public Data Has Been Removed. └ Mailed _____ └ Faxed _____ └ In Person _____	ADDITIONAL REMARKS:
PAYMENT DUE: _____ PAYMENT RECEIVED: _____	