

# SPANISH FORK POLICE DEPARTMENT

## GRAMA REQUEST FOR RECORDS

Spanish Fork City ordinance allows for up to **ten (10) business days** to provide the requested record, a denial or a notice of extended time for response to records request.

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

(A person requesting a "Non-Public" record is required to provide positive identification.)

Description of records sought (records must be described with reasonable specificity):

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Is this copy needed for insurance purposes?

I would like to inspect the records.

I would like to receive copies of the records. I understand that I will be responsible for copy costs. (I am willing to pay costs of up to \$\_\_\_\_\_. I further understand that the agency will contact me if estimated costs are greater than the amount I have specified, and that the agency will not respond to a request for copies if I have not allowed for adequate costs.)

If record is "Non-Public", check one of the following and attach necessary documentation.

I am the subject of the record.

I am the person who provided the information.

I am the legal guardian of subject of the record.

I am authorized to have access by the subject of the record or by the person who submitted the information. (Attach copy of Power of Attorney)

Other. Please explain. \_\_\_\_\_

I am requesting expedited response. (Please attach information that shows your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or please attach other information that demonstrates that release of this information will benefit the public rather than the person.)

\_\_\_\_\_  
Signature of person making request

\_\_\_\_\_  
Date

OFFICE USE ONLY:

Date record released: \_\_\_\_\_

Released by: \_\_\_\_\_

Copy fee: \_\_\_\_\_