



**CITY OF TWENTYNINE PALMS
REQUEST FOR PUBLIC RECORDS**

6136 Adobe Road
Twentynine Palms, CA 92277
Tel (760) 367-6799
Fax (760) 367-4890

Reserved Date Stamp

Type of Request:

_____ Inspect Public Records during City business hours.

_____ Copies of Public Records.

_____ I would like to pick the copies up once available at City Hall.

_____ I would like copies of the records sent to me by mail to the address listed above.

PLEASE NOTE Requests for City documents must be made to the City Clerk's Department. There is a charge for most public documents of \$1.00 for the first page and \$0.15 per page thereafter (plus a mailing fee if you would like the records mailed). Your request will be completed within 10 business days (excluding holidays) unless otherwise noted. You will be contacted when your request is ready for pick-up.

Records Requested (Please be specific):

Signature _____ Date: _____

Name (Print) _____ Telephone: _____

Mailing Address: _____ State _____ Zip: _____

FOR OFFICE USE ONLY:

Document (s) reviewed immediately _____ Copies provided by _____ Total pages _____ Total cost\$ _____

Comments: _____