

# REQUEST FOR PUBLIC RECORDS

3219 California Pkwy, Forest Hill, TX 76119  
Phone: (817) 568-3000 Fax: (817) 568-3049



By submission of this form, you are requesting the information stated below. Understand that some documents or portions thereof, are subject to non-disclosure under Chapter 552 of the Texas Government Code, Public Information Act and/or other state and federal laws. Confidential information cannot be released and items may be redacted (removed), if applicable. After reviewing your request, if the City of Forest Hill believes that the items responsive to your request contain additional confidential information, an opinion will be sought from the Office of the Texas Attorney General.

**Applicable charges for public information will apply. Pursuant to section 552.2615 of the Public Information Act (the PIA), chapter 552 of the Government Code, if a request for information under the PIA will result in charges of more than \$40, a governmental body must send a cost estimate to the requestor before doing any work on the request.**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Public Records Requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I  have received or  have not received the records requested.  
(Please check the applicable box.)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

- |                                     |  |
|-------------------------------------|--|
| _____ Records Immediately Available | _____ Reviewed in Office               |
| _____ Duplicate Provided            | _____ Record in Storage                |
| _____ Request for Record Denied     | _____ Discussed w/City Manager         |
| _____ Discussed w/City Attorney     | _____ Consider Exception to Disclosure |

Staff Comments:

\_\_\_\_\_  
\_\_\_\_\_

ORR Number	Date Received	Date to Department	Date Closed