



**CITY OF BURNET**  
**REQUEST FOR DISCLOSURE OF PUBLIC RECORDS**  
**PLEASE PRINT ALL INFORMATION**

Every effort is made to expedite all requests for disclosure of public records. The City will respond to your request within ten (10) working days, however, due to personnel demands, schedules, and type of information requested, as allowed by law, the disclosure of records may take longer.

**NAME:** \_\_\_\_\_  
**PHONE:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_

**DESCRIPTION OF REQUESTED RECORD** (be as specific as possible with type, dates, etc.)

Date of Request	Signature of Applicant
<p><b>TO:</b> _____</p> <p>The information requested above is information pertinent to your department. This information is to be returned to the PIO (City Secretary) by _____ for disclosure to the requestor, along with this original request.</p> <p><b>NOTE:</b> Should there be a reason this information cannot be furnished in the time frame requested, please so note below and return this form to the PIO (City Secretary)</p> <p>_____ _____</p> <p>_____ _____</p> <p>Signature of Department Director required _____ Date _____</p>	<p><b>Date/Time Faxed/Delivered to Department:</b></p> <p>_____</p> <p><b>Date/Time Returned from Department:</b></p> <p>_____</p>
<p><b>REVIEWED BY PUBLIC INFORMATION OFFICER ON</b> _____</p> <p><b>APPROVED FOR DISCLOSURE:</b> ____ YES ____ NO (State Reason)</p> <p><b>REASON FOR NON-APPROVAL:</b></p> <p>_____ _____ _____ _____</p> <p><b>SIGNATURE OF PIO:</b> _____ <b>Date</b> _____</p>	<p><b>Log Reference:</b> Page _____ of _____ Line Number _____</p> <p><b>Date Received:</b> _____</p> <p><b>Time Received:</b> _____</p>
<p><b>REQUIRES REVIEW BY CITY ATTORNEY:</b> ____ YES ____ NO</p> <p><b>CITY ATTORNEY APPROVED FOR DISCLOSURE:</b> ____ YES ____ NO (State Reason)</p> <p><b>REASON FOR NON-APPROVAL:</b></p> <p>_____ _____ _____ _____</p> <p><b>APPROVAL BY CITY ATTORNEY:</b> _____ <b>Date</b> _____</p>	<p><b>Date/Time Faxed to City Attorney:</b></p> <p>_____</p> <p><b>Date/Time Returned from City Attorney:</b></p> <p>_____</p>
<p><b>REQUIRES RULING FROM ATTORNEY GENERAL:</b> ____ YES ____ NO</p> <p><b>ATTORNEY GENERAL APPROVED FOR DISCLOSURE:</b> ____ YES ____ NO</p> <p><b>DATE OF APPROVAL FOR DISCLOSURE BY ATTORNEY GENERAL:</b> _____</p>	<p><b>Date Mailed to Attorney General:</b></p> <p>_____</p> <p><b>Date Returned from Attorney General:</b></p> <p>_____</p>
<p><b>DATE DISCLOSED:</b> _____</p>	

FEES: \$ _____ (Calculation on Reverse Side) GENERAL RECEIPT # _____  RELEASED BY: _____	
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**CITY OF BURNET  
PUBLIC INFORMATION CHARGES**

Standard-Size Copy (up to and including 8.5 inches X 14 inches) reproduced by copier or computer printer		
a. 50 pages or less of readily available information .....	_____ \$ .10 per page	_____
b. in excess of 50 pages of readily available information .....	_____ \$ .85 first page	_____
	_____ \$ + .15 ea. adtnl	_____
c. non readily available information .....	_____ \$ .70 first page	_____
	_____ + .15 ea. adtnl	_____
	_____ + personnel costs**	_____
Nonstandard-Size Copy		
a. Diskettes .....	_____ \$ 1.00	_____
b. Tape Cartridge .....	_____ \$38.00 (250mb)	_____
c. VHS video cassette/CD .....	_____ \$ 5.00	_____
d. Audio cassette .....	_____ \$ 4.00	_____
e. Paper copy (oversized) .....	_____ \$ 1.00	_____
f. Large Format Print .....	_____ \$ 1.50/linear foot	_____
Personnel Charge - prorated .....	_____ \$ 15.00/hr	_____
not charged for 50 or fewer readily available standard size form, ..... or time of an attorney, legal assistant, or reviewer		
Overhead Charge for non readily available or in excess of 50 pages .....	_____ 20% of total Personnel Costs	_____
Computer Resource Charge – .....	_____ \$ 1.00/hour	_____
Remote Document Retrieval Charge .....	_____ Actual cost	_____
Miscellaneous Supplies Charge (labels, boxes, and other producing supplies) ....	_____ Actual cost	_____
Photographs .....	_____ Actual cost	_____
Outsourced/Contracted Services .....	_____ Actual cost	_____
Postal and Shipping Charge .....	_____ Actual cost	_____
Fax Charge .....		
Local .....	_____ \$ .10/page	_____
Long Distance-same area code .....	_____ \$ .50/page	_____
Long Distance-different area code .....	_____ \$ 1.00/page	_____
Inspection of Records .....		
Request for 50 or fewer readily available documents .....	_____ No Charge	_____
Request for more than 50 readily available documents .....	_____ Assessed	_____
Deposit if estimated charges exceed \$100.00 .....	_____ ½ charges	( _____ )

Total Charges \_\_\_\_\_  
Transfer charges to front page