

City of Hagerman
191 State Street North
P.O. Box 158
Hagerman ID, 83332
Phone 208-837-6636
clerk@hagermanidaho.us



Mayor
Jared Hillier
City Clerk
Ashley Cook
City Superintendent
Justin Hulme

PUBLIC RECORDS REQUEST

Idaho's Public Records Act is found in Title 74, Chapter 1 of the Idaho Code ("Public Records Act"). The City endeavors to comply with all requirements of the law.

Requests for records submitted by Idaho residents to the City will receive an initial response within three business days. If the request takes additional time to process, the requestor will receive notification that additional time is needed. Residents are required to pay for costs incurred for responses that require more than two hours of clerical time or more than one hundred (100) copied pages. Requests by non-residents have longer time frames and additional cost burdens.

Date: _____

Name: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

- These records pertain to myself.
- I wish to examine these records.
- I am requesting copies of these records.
- I will pick these records up.
- I prefer to receive a Fax. Fax Number: _____
- I prefer that records be sent to me by email: _____

I request, pursuant to Idaho Code, Title 74, Chapter 1, to examine or copy the following public records:

Please provide details regarding the request including dates and location, where applicable.

Idaho Residency

- () I am a resident of the state of Idaho. *See Idaho Code section 74-101(15).*
- () I **am not** a resident of the state of Idaho. *Please note that fees apply to requests by non-residents, even for the first two hours or 100 pages. See Idaho Code section 74-102 (g).*

I acknowledge by my signature that the records sought by this request will not be used for a mailing list or telephone list as set forth in Idaho Code section 74-120. I also affirm that my representation of my Idaho residency status is accurate.

I certify (or declare) under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Requestor's Printed Name: _____

Requestor's Signature: _____

(For City Use Only)

Request received on _____

Employee Processing Request: _____

Date Completed: _____

Fees Due: _____

Records Request:

- () Granted
- () Granted in part, denied in part because: _____

- () Denied. Reason for denial: _____

- () Additional detailed needed to narrow scope. _____

- () Payment in advance required \$ _____

Response sent:

- () Email: _____
- () Fax: _____
- () Picked up: _____