

Village of Palmyra Clerk's Office

Public Records Request

100 W. Taft St. Palmyra, WI.
262-495-8316

Records may be released between the hours of 8:00 a.m. and 4:00 p.m. Monday through Thursday, and 8:00 a.m. to 12:00 p.m. Fridays.

While you are not required to do so, you may fill out this form if you are requesting an inspection or copies of Village records. You will be contacted when your request is ready in compliance with Wis. Stats. § 19.35(4). If no phone number is provided, information will be left for pick up for a period of 7 days.

Please be advised that a reasonable time to reply to public records requests depends in part on the complexity of the request. Wisconsin case law has referenced ten days as a reasonable time to respond to non-complex, single-issue requests. However, for broad, complex, or multi-issue requests, more time may be required to search for, gather, and assemble all responsive documents. Please note:

- The records custodian is under no obligation to create a new record by extracting information from existing records and compiling the information in a new format, except as required by Wis. Stats. § 19.35(1)(L).
- A request for access to a public record will not be refused “because the person making the request is unwilling to be identified or to state the purpose of the request,” per Wis. Stats § 19.35(1)(I).

Any request that is estimated to exceed \$50 in the actual, necessary and direct cost to the Village of Palmyra for the locating of the documents will be required to be prepaid prior to the records custodian beginning the research for the responsive documents pursuant to Wis. Stats. §§ 19.35(3)(c), (f). If so requested, upon conclusion of the research you will be provided a statement showing the actual time incurred in locating the documents, and if the actual time is less than the estimated hours, the difference will be refunded to you, and if the actual time is more than this estimated hours, you will be charged for this additional location expense.

Additionally, all requests exceeding \$5.00 in total fees must be paid in advance pursuant to Wis. Stats. §19.35(3)(f).

Date Request Received: _____

Your Name: _____

Address: _____

Telephone Number & Email Address: _____

Information or Records Requested (please be specific): _____

Signature of Person Receiving Request:

Fees: \$.25 per copy up to 50, \$.20 per copy over 50 (black) \$ _____
\$.50 per copy up to 50, \$.45 per copy over 50(color) _____
DVD, CD, or USB Drive \$5.00 each \$ _____

Postage \$ _____

Faxes \$1.00 first page, \$.50 each additional page \$ _____

Administrative Charges: Requests requiring research shall be assessed labor fees:
Hours @ \$25/ hr. (or fraction of) \$ _____

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To Be Completed by Custodian of Record Requested or Deputy:

Municipal dept., office or work unit receiving request: _____

Date & Time request received: _____

Action taken on request: () Approved () Approved in part & denied in part () Denied

Reason for denial: _____

Fee Amount: _____

Name & Title of Custodian/Deputy Acting on Request: _____

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If you believe your request has been misinterpreted, or considered in an inappropriate or unlawful manner, please do not hesitate to contact the records custodian above. Please also be advised that this determination is subject to review by mandamus under §19.37(1), Wis. Stats., or upon application to the Attorney General or a District Attorney.