**City of Holyoke, Department of Codes and Inspections**

**20 Korean Veterans Plaza, Room 300**

**Holyoke, MA 01040 Telephone (413) 322-5600 Fax (413) 322-5601**

**Public Records Request Form Instructions**

**This form is only to be used to request public records that the Department of Codes and**

**Inspections may have.**

**Property Address:** Please fill out the correct address. This may include multiple numbers such as 144-

152. Only the number(s) you fill in this line will be searched for.

**Description of Property:** Provide a brief description of the property to aid in the search of documents (5-unit apartment). The address may include multiple structures. If the description does not meet what we have on file for the lot we may call for clarification.

**Map Block Lot:** This is the most accurate way to search for property documents. If you know the Map Block Lot, than it will include all addresses that are associated with the lot within the city. This number sequence will be 000-00-000.

**Records Requested:** In this area detail the type of documents you are looking to have copies of. Some common requests are Certificates of Occupancy, Letters of Violation, Building Permits (Specify types i.e. Plumbing, Building, Electrical or all). A request can also be made to have “any and all correspondence” related to a certain property. Requests will include a search of both paper documents and digital documents.

**Date Range:** A date range is needed to search for documents. It is usually one to ten years. Searches beyond the last ten years will take longer and be more extensive but can be done.

Commonwealth of Massachusetts

***City of Holyoke***

**Department of Codes and Inspections**

20 Korean Veterans Plaza, Holyoke, Massachusetts 01040 ~ (413) 322-5600

**PUBLIC RECORDS REQUEST**

**REQUESTER’S NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This is a request under the Massachusetts Public Records Law (M.G.L. Chapter 66, Section 10.) I am requesting that I be provided a copy of the following property address(s):

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|  |
|   I would like you to search the years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

After the requested records are retrieved I would like to:

□ Inspect the records □ Receive hard copies via **mail** □ or **pickup**

□ Receive electronic copies via **email** □ or **storage device** (thumb drive)

 The Public Records Law requires you to provide me with a copy of or allow me to inspect the records requested above within 10 business days. If you cannot fully comply with my request, you are statutorily required to cite an exemption and to explain how and why the exemption applies to the records I am seeking. I understand that any reasonable fees associated with my request must be paid prior to my receiving or inspecting said records.

  **Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 The fees associated with this request are summarized as follows: Photocopies $0.05 per page

 Digital copy via email $0.00

 Copy on storage device (thumb drive) $5.00

 Employee time $19.00/hr over 2 hours

 Postage & handling is actual cost

FOR USE BY PUBLIC RECORDS OFFICER

Received By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initial Response Due Date (10 business days from date received) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Final Response Due Date (25 business days from date received) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_