

CITY OF CULLMAN

204 2nd Ave NE
Cullman, Alabama 35055

(256) 775-7102
cityhall@cullmanal.gov

P.O. Box 278
Cullman, Alabama 35056

Public Records Information Request

Requestor Information

Full Name: _____
Last First M.I.

Address: _____
Mailing Address Apartment/Unit #

_____ *City State ZIP Code*

Home Phone: () _____ Other Phone: () _____

Email Address: _____

Information Requested

NOTE: Requests must be submitted to the City Clerk's Office at least seven (7) working days in advance of the date needed. Every effort will be made to fill the request within that time period. If it will take longer than seven (7) days, the requestor will be notified and given an estimated delivery date. The fee for copying documents shall be \$0.50 per one-sided page for pages not exceeding 8.5" x 14", plus actual costs including staff time spent in research and compilation. An estimate will be calculated by the City Clerk's Office and the requestor notified of the final cost before delivery. All requests will be received and processed by the City Clerk's Office.

Specific Information Requested: _____

Method of Delivery Preferred

Every effort will be made to comply with the requestor's preference. However, the City of Cullman reserves the right to refuse requests to produce or provide records in certain formats when it is not feasible or practical to do so.

Photocopies: ___ Mail ___ Pick Up Electronic Format: ___ Email ___ CD/Flash Drive/Other

Inspect in Office During Normal Business Hours Other _____

Purpose of Request: _____

Date Information Needed: _____

Your signature is required for processing as an acknowledgment and agreement of the conditions stated:

→SIGN HERE _____

FOR OFFICE USE ONLY

Request Received by: _____ Date: _____

Calculated Time & Cost: _____

Notes: _____

Date Information Delivered: _____ By: _____