



111 Logsdon St., Andrews, TX 79714
432/523-4820
www.cityofandrews.org

PUBLIC INFORMATION REQUEST FORM

Requestor Name: _____ Date: _____

Organization (if applicable): _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail Address: _____ Phone : _____

Description of the Information Requested

Name(s) of person(s) involved: _____

Location of Incident: _____

Date of Incident: _____ Police Case Number (if known) _____

Note: Describe the information as precisely as you can. Include any details that may help us in locating the information. _____

- Please Check One:
- I request to view the records at City Hall.
 - I request digital copies be sent to the above email address.
 - I request paper copies be mailed to the above address.
 - I request to pick up copies at City Hall.

In making this request, I understand the City is under no obligation to create a document to satisfy my request or to comply with a standing request for information. I further understand that the information will be released only in accordance with the Public Information Act, which may require a determination as to confidentiality by the Texas Attorney General prior to a release. I further understand that the City has 10 business days in which to request such a determination. The Attorney General’s office has 45 business days to respond to a request. Please check the box below if you are willing to receive only non-confidential information and expedite this request.

- Please send me only non-confidential information.** I understand some records may be redacted to withhold confidential information. This includes, but is not limited to: birth date, driver’s license numbers, social security numbers, license plate and VIN numbers, certain addresses and telephone numbers, witness information, and confidential account information.

The requestor is liable for all charges relating to this request as provided in the Public Information Act and Appendix A of the City’s Code of Ordinances.

You can find additional Public Information Act resources on the Attorney General's website at <http://www.texasattorneygeneral.gov/open-government>.

Requester Signature

FOR CITY USE ONLY			
Date Received: _____	Date Released: _____	Department: _____	City Attorney: _____
Fee Paid: _____	AG Opinion Requested: _____	AG Opinion Received: _____	