

City of Irving Open Records Request Form

Date Received

Submit form to: Public Information Coordinator
The City Secretary's Office
825 W. Irving Blvd., Irving, TX 75060

E-mail: Save this form to your files
then e-mail as an attachment to:
openrecords@cityofirving.org

Date Submitted: _____

Contact Phone No.: _____

Name of Requestor: _____

Mailing Address: _____

E-mail: _____

Describe in detail the public records you are requesting:

Under the Texas Public Information Act some information may be confidential or need to be withheld from release. Do you agree to the redaction of qualifying information under the Texas Public Information Act?

Yes [] No []

* Records will be provided based on available format. For information regarding costs of public records, go to the Texas Attorney Web site: <http://www.oag.state.tx.us/open/charges.shtml>

OFFICE USE ONLY

TO: _____ _____ _____ _____	Tracking Number	PI - -
	DUE DATE:	
The above Open Records Request requires a response from your department. _____ Please respond directly to the requestor. _____ Send records to the City Secretary's Office	Responding department: Please fill out the following and return to the City Secretary's Office. Date of Response: _____ Time spent on processing: _____ hours _____ minutes Total No. of pages to requestor: _____ Amount charged (if applicable): \$ _____ Staff processing request: _____	
<i>It is the Department's responsibility let CSO and CAO know if a document requested is confidential or should be protected under state law</i>		