BOONE COUNTY PLANNING COMMISSION
PUBLIC RECORDS REQUEST FORM

Date of Request_____

Applicant Information

Name:_____

Address:_____

Phone:_____

Specific Public Records Requested

(Use Other Side or Additional Sheets if Necessary)

_____

_____

_____

To be Filled in by the Boone County Planning Commission

The above records are available at _____
(Place)

on _____ at _____ a.m./p.m.
(Date) (Time)

The above request is delayed due to:

_____ Active use of requested records.
_____ Records are in storage and must be located.
_____ Other _____

The request for records is denied due to the following reason:

_____ The records requested are exempt in accordance with K.R.S. 61.880 (see attached letter).

_____ _____
(Date) Authorized Signature
Boone County Planning Commission

To be Signed by the Applicant

I have received the above requested records and understand that I may have copies made at the appropriate costs referred to in Section XI, Page 7 of the Boone County Planning Commission Fee Schedule.

_____
Signature of Applicant

Total Pages Copied:_____ Total Amount Paid:_____