

CITY OF BIG BEAR LAKE
39707 BIG BEAR BOULEVARD
P.O. BOX 10000
BIG BEAR LAKE, CA 92315-8900
(909) 866-5831 (909) 866-6766 FAX

PUBLIC RECORDS REQUEST

Pursuant to Government Code Section 6256 I am requesting to examine _____ and/or copy _____ (check one), of the following records:

I understand that the City must make a determination as to whether to comply with my request within **ten (10) working days** of receiving this request, and that I will be notified in writing, or by telephone, when the records are available. If unusual circumstances exist, as defined by law, a response to my request may be extended by an additional **ten (10) working days**. I understand that I will be charged a reproduction fee, plus tax, as follows for any copies requested:

| | |
|------------------|----------------|
| Pages 1 - 4 | \$.25 per page |
| Pages 5 - 50 | \$.10 per page |
| Pages 51 or more | \$.05 per page |

If my request is denied, I will be notified in writing with the reasons for the denial within five (5) working days after the ten (10) day determination time limit has expired.

DATE

SIGNATURE OF REQUESTOR

This request is made by: (please print legibly)

Name: _____

Company: _____

Mailing Address: _____

Telephone: _____ FAX: _____

Request received by: _____