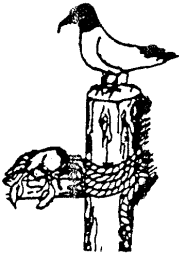


Date received: \_\_\_\_\_  
 Received by: \_\_\_\_\_  
 Method delivered to Requestor: \_\_\_\_\_  
 \_\_\_\_\_  
 (In person, mailed, faxed, emailed)



**CITY OF SEADRIFT**  
 Post Office Box 159/501 S. Main St.  
 Seadrift, Texas 77983  
 Tel: (361) 785-2251  
 Fax: (361) 785-2208  
[seadrift@seadrifftx.org](mailto:seadrift@seadrifftx.org)



**REQUEST FOR PUBLIC INFORMATION FORM**

For guidance regarding your rights as a requestor and the public information procedures adopted by this governmental body, you may review the governmental body's notice required under section 552.205 of the Government Code. You can find additional Public Information Act resources on the Office of the Attorney General's website at <http://www.texasattorneygeneral.gov/open-government>.

**A. Requesters Contact Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Company/Organization: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_  
 Preferred Manner of written communication:  Email  Standard Mail

**B. Description of the Information Requested:**

(Note: Describe the information as precisely as you can.)


Date Range (optional): From \_\_\_\_\_ to \_\_\_\_\_

Under the Public Information Act, some categories of information do not have to be released. Exceptions to disclosure fall into two general categories: 1) mandatory exceptions that make information confidential and require a governmental body to withhold information, and 2) discretionary exceptions that allows but does not require a governmental body to withhold information. You may find information about mandatory and discretionary exceptions at: <https://www.texasattorneygeneral.gov/opengovernment/members-public/confidential-information-under-public-information-act>.

In most instances, a governmental body is required to request a decision from the Attorney General to withhold information from a requestor. However, a requestor may permit a governmental body to redact information without requesting an Attorney General decision. You are not required to agree to the redaction of any information responsive to your request but doing so may streamline the handling of your request. If you agree to redactions in this request, then you may request the redacted information in a future information request.

- Do you agree to the redacted information that is subject to mandatory exceptions, provided such redactions are clearly labeled on the information you received?  Yes  No
- Do you agree to the redaction of information that is subject to discretionary exceptions, provided such redactions are clearly labeled on the information you receive?  Yes  No

**REQUEST FOR PUBLIC INFORMATION FORM - Continued**

**C. Information Preferences:**

- How would you like to have the information provided?  Copies  Inspection (go to section D.)
- If available, do you wish to receive an electronic copy of the information?  Yes  No

**D. Inspection of Documents**

The City Secretary or the knowledgeable personnel will set up an appointment date & time so that documents may be reviewed. Failure to keep appointments for document review may result in losing the opportunity to review until another appointment date is set.

Appointment Date & Time: \_\_\_\_\_

**E. Charges for Copies or Labor**

Document or Record Type	Charge
Standard-sized paper copies	\$.10 per page with information
Paper copies larger than 11x17	Actual Cost
Postage	Actual Cost
Labor/Clerical	\$15 per hour

Requestor has the option to refuse to pay estimated charges over \$40. If Requestor refuses to pay charges over \$40, requester must either amend original request or send a complaint of overcharges to the Office of the Attorney General. If estimated charges exceed \$50, prepayment or deposit may be required.

Do you accept any estimated charges over \$40?  Yes  No

**F. Terms of Agreement**

In making this request I understand that the City is under no obligation to create a document to satisfy my request or to comply with the standing request for information. I understand and agree that the information requested may be confidential or otherwise exempt from public disclosure in accordance with requirements of the Texas Public Information Act or by other governing laws and will be redacted. I further understand that a request for "no redactions" will be sent to the Office of Texas Attorney General for evaluation and ruling as to what portions of the requested information may be withheld and what must be released; such submissions can take forty-five (45) or more days from date of submission.

I also understand that the City of Seadrift has ten (10) business days to reply to this request.

▶ Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**G. Office Use Only**

<b>Request ID:</b>	<b>Date Received:</b>
<b>Department:</b>	<b>Deadline for Fulfillment:</b>
<b>Documents Received:</b>	<b>Delayed Date:</b>
<b>Sent to City Attorney:</b>	<b>Completed Date:</b>
<b>Knowledgeable Personnel:</b>	<b>Appointment Date Set:</b>

Request fulfilled by: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Department: \_\_\_\_\_