

**REQUEST FOR PUBLIC RECORDS**

Date: \_\_\_\_\_

Name of Requester: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Pursuant to O.C.G.A. §50-18-70 et seq., I am formally requesting to inspect certain public records. *(Please note that the City of Mableton is a new city and is in a transitional phase, and certain records may still be available at Cobb County. The open records request portal for Cobb County is at <https://www.cobbcounty.org/board/county-attorney/open-records-requests>: In particular, records requested through the Mableton City Clerk’s office for inspection are:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

I agree to pay any copying and/or administrative costs incurred in fulfilling my requests to the extent permitted by Georgia law (O.C.G.A. § 50-18-71 (c) (1)). Such costs may include copying charges of \$.10 per page and administrative charges for search, retrieval, and other direct administrative costs. Such administrative charges should not exceed the salary of the lowest paid full-time employee who, in the discretion of the custodian of the records, has the necessary skill and training to perform the request. The requester will not be charged for the first fifteen minutes of time.

Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

*Please return this form to:*

City Clerk’s Office  
Susan D. Hiott, MMC  
City of Mableton  
1400 Veterans Memorial Hwy SE  
STE 134-200  
Mableton, GA 30126     [Susan.hiott@mableton.gov](mailto:Susan.hiott@mableton.gov)  
404-927-9502