

City of Livingston, Montana
414 East Callender Street
Livingston, MT 59047
Telephone: (406) 823-6000
Email: citymanager@livingstonmontana.org

REQUEST FOR PUBLIC RECORDS

NOTE: City of Livingston will respond timely to accommodate this request.

Date of request: _____

Is this a request to inspect or a request for copies?

Inspect: _____

Copies: _____

Pursuant to Article II Section 8 through 10 of the Montana Constitution and Title 2 Chapter 6 of the Montana Code Annotated (MCA) I am requesting copies of the following records from the City of Livingston: (Describe the records you want, where they might be located, time frame, author, recipient, type, i.e., reports, letters, memoranda, forms, e-mail, etc.)

Fees: (Check one.)

____ I am willing to pay applicable fees:

FEES/CHARGES:

(1) Fees may be charged in accordance with §2-6-1006 MCA for available public records.

(2) Copy charges will be set at \$0.10/page for copies of any material deemed to be Non-Routine Public Information. The hourly rate of the individual or individuals charged with the collection and or production of the records may be charged for each hour, or fraction of an hour, of copying/research service has been provided.

(3) Published and/or documents prepared by commercial printing shops will be based on a "document charge" if the entire document is requested. Copies of audio cassettes or digital recordings will be \$5.00/tape/cd, provided the department has the ability to produce copies plus the City's cost for the tape/cd and the hourly cost of the employee who must produce the record.

(4) Copies of video cassettes, if available, will be \$7.50/tape, provided the department has the ability to produce copies plus the City's cost for the tape and the hourly cost of the employee who must produce the record.

(5) Departments may set document fees for specific documents contained in their departments, such as maps, plats, etc. The Department will set the fee, to recover costs.

(6) Copy fees may not be charged to other cities requesting materials, and copies for other governmental agencies or professional organizations may be provided on a "reciprocal" basis; if they charge the City, they will be charged.

(7) The certification charge will be \$5.00.

(8) Payment for charges must be received before copies are released to the requester, whether in person, by mail, by FAX or e-mail.

____ I am requesting a fee waiver. Justification for fee waiver is attached. (Attach separate sheet.)

Requested by: _____

Signature

Printed Name

Address

_____/_____
Contact Telephone/Email

(Do not write below this line – for internal routing only)

Request Received by: _____

Date Received: _____ Date Response on Fees Due: _____

Transmitted for response to _____

Date of transmittal: _____

Transmittal received by _____

Date of Transmittal receipt: _____

Time extension to: _____ Extension Notice sent on: _____

Amount of time (in hours) used to complete this request: _____

Date Response Made: _____ Document

does not exist: _____

Document not identifiable: _____

Number of Copies Made: _____

Signature of Employee Responding

Printed Name of Employee Responding _____ Date
transmitted to City Administrative Office for Response: _____

DATE OF RESPONSE: _____

TO: _____

THE ABOVE REQUESTED RECORDS ARE: (check one)

_____ Available for inspection in the Administrative Office immediately upon processing your request.

_____ To be copied at your expense and will be made available to you on the day of _____, 20____, at o'clock __ M.

_____ Not subject to disclosure pursuant to Montana Records Statutes, i.e. the demands for individual privacy clearly exceeds the merits of public disclosure. (Art. II, Sec. 10, Mont. Const. §44-5-303 MCA)

_____ The subject of a written request for a determination from the Attorney General as to whether they are subject to disclosure.

_____ Not in existence, due to "vagueness" of request. (Not enough information to process request).

_____ Not in existence due to the fact that it requires the creation of documents.

Fees due prior to release of records:

Number of Pages _____ x 10¢ per page = \$ _____

Processing fees at \$ _____ per hour for \$ _____

Processing fees at \$ _____ per hour for \$ _____

Total Fees and costs: \$ _____

City Manager or designee
