

City of Livingston, Montana
414 East Callender Street
Livingston, MT 59047
Telephone: (406)823-6001
Facsimile: (406)222-6823

REQUEST FOR PUBLIC RECORDS

NOTE: City of Livingston will attempt to respond within 10 business days.

Date of request: _____

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

Inspect: _____

Copies: _____

Pursuant to Article II Section 8 and 9 of the Montana Constitution and 7-1-4144 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) No fee will be charged for requests of those materials deemed to be Routine Public Information.

(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 \$10.00/hour will be charged for each hour, or fraction of an hour, after 30 minutes 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. The Department will set the fee, to recover costs.

(4) 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.

(5) 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.

(6) Departments may set document fees for specific documents contained in their departments, such as maps, plats, etc. A fee schedule will be posted in each department – for those departments that have a fee schedule. For records not specific to a department, the departmental fee schedules should not conflict with the specific charges listed in this section.

(7) Copies of computer generated documents or electronic information will be charged as follows (M.C.A. 2-6-110):

- (a) the City’s actual cost of purchasing the electronic media used for transferring data, if the person requesting the information does not provide the media;
- (b) expenses incurred by the City as a result of computer processing charges;
- (c) expenses incurred by the City for providing on-line computer access to the person requesting access;
- (d) other out-of-pocket expenses directly associated with the request for information; and
- (e) the hourly rate of \$10.00/ hour will be charged for each hour, or fraction of an hour, after 30 minutes of copying service has been provided.

(8) Copy fees will NOT be charged to other cities requesting materials.

(9) Copies for other governmental agencies or professional organizations will be provided on a “reciprocal” basis; if they charge the City, they will be charged.

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

(11) 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/Fax

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

Request Received By: _____

Date Received: _____ Date Response 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 Public Records Statutes, i.e. the demands for individual privacy clearly exceeds the merits of public disclosure. (Art. II, Sec. 9, Mont. Const., MCA 7-1-4144)

_____ 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 \$10.00 per hour for \$ _____

Total Fees and costs: \$ _____

City Manager or designee
