

CITY OF DOWNEY
OFFICE OF THE CITY CLERK
1111 Brookshire Avenue
Downey, CA 90241 (562) 904-7280 FAX: (562) 923-6388

REQUEST FOR PUBLIC RECORDS

Requestor (Print Name)/Department _____ Date _____

Address (if Applicable) _____ Daytime Phone # _____

Signature _____ E-Mail / Fax # _____

Services requested: Inspection Copying Inspection & Copying
 General Information Other _____

Specific description of public records requested (list each document, file, or record separately):

The City's standard copying fee is \$.60 for the 1st page and \$.10 every page thereafter. An advance copying deposit may be required.

***** For City Use Only *****

Request received by: Walk-in Mail Fax
 Inter-Department Other E-Mail

Statute Deadline _____ Copy Charge _____ Date Assigned _____

Staff Initials _____ Completion Date _____ Time to Complete _____

Customer Type: Public City Staff Other Government Other