



# Request for Record Inspection

# City of Merriam, Kansas

9001 W 62<sup>nd</sup> Street, Merriam, KS 66202-2818 913-322-5500

***(To be completed by requestor) and MUST be filed with the Merriam City Clerk.***

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Address: \_\_\_\_\_  
Street # City and Zip Phone #

Signature of requestor \_\_\_\_\_

Records Sought: Please provide as specific a description as possible of the record(s) you desire to inspect. Include record titles and dates, as well as the names of city agencies or departments which produced or hold the record(s):

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

### ***(To be completed by City of Merriam Record Custodian)***

*Request for inspection must be responded no later than the end of the third business day following this request.*

**CHARGES:** A charge for providing access of public records is authorized by state law and has been established by the City of Merriam's Governing Body. These charges are set at a level to compensate the City for the actual costs incurred in honoring your request. The fee schedule established by the City is available for your review.

The charge to you for accessing the record(s) you request is: \$ \_\_\_\_\_

Prepayment of the above amount \_\_\_\_\_ is required \_\_\_\_\_ is not required

Request Received: Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Access Provided: Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Time \_\_\_\_:\_\_\_\_ AM / PM Time \_\_\_\_:\_\_\_\_ AM / PM

Staff Time Involved: \_\_\_\_\_ Hours. \_\_\_\_\_ Minutes @ \_\_\_\_\_ (per hour charge)

Total charges \$ \_\_\_\_\_ Prepaid \$ \_\_\_\_\_  
Paid \$ \_\_\_\_\_ Billed \$ \_\_\_\_\_

Record Custodian: \_\_\_\_\_  
Print full name Signature Date

*Please read and sign certification on the reverse side of this form  
Your copy of this form is your receipt*

***CERTIFICATION OF REQUESTER***

I, \_\_\_\_\_, having made a written request for access to and/or copies of

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

which is/are (a) public record(s) pursuant to the Kansas Open Records Act (KORA), do hereby certify that I do not intend to, and will not:

- use any list of names or addresses contained in or derived from the record(s) or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or
- sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the record(s) or information for the purpose of allowing that person to sell or offer to sale any property or service to any person listed or to any person who resides at any address listed.

\_\_\_\_\_  
Signature of Requester

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State Zip Code