



Planning & Community Services Department

"Serving Billings, Broadview and Yellowstone County"



510 North Broadway, 4th Floor
Billings, Montana 59101

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REQUEST FOR PUBLIC RECORDS

I, _____ (Applicant), do hereby make application for inspection and/or copying of the following public records of Yellowstone County or the City of Billings, Montana:

(Please be as specific as possible in your request, to assist us in locating the records as quickly as possible.)

Applicant's Signature _____

Date Signed _____

Address: _____

Telephone: HOME: _____ WORK: _____

Dept. Head Authorization: _____

"INTERNAL USE ONLY BELOW THIS LINE"

To Applicant:

The Above Requested Records Are: (Check One.)

- Available for inspection in the Office of the City Clerk immediately upon processing your request.
- To be Copied at your expense and will be available to you on _____ (day, date) at _____ o'clock __. M.
- Currently in storage/use and not available for inspection/copying at this time. These records will be made available to you in the Office of _____ on the _____ day of _____, 200__, at _____ O'clock __. M.
- Not subject to disclosure pursuant to Montana Public Records Statutes (Art.II, Sec. Mont. Const.; M.C.A. 7-1-4144.)
- The subject of a written request for a determination for 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.

_____ Number of Copies; Per page charge: \$0.25. Total: \$ _____.

Document Charge: \$ _____. Processed By: _____

Computer time: \$10.00/hr After First ½ Hour.