



**Development Services Department
REQUEST FOR PUBLIC INFORMATION**

Name: _____ Date: _____

Address: _____

City: _____ State: _____, Zip Code: _____

Phone Number(s): _____

What do you require (please check): _____ Physical examination of files; _____ Copies (how many); _____
_____ Manipulation of Data onto CD; _____ Other (Please explain): _____

Please indicate the information you require: Project name, list each requested document, project file number. Please be as specific as possible, provide staff with all information you have available to you to avoid delays. Allow three (3) days for a search of the records. Attach a separate sheet if necessary.

COPY CHARGES: Letter size (8.5 x 11) \$.25 per page after 10 pages; Legal size (8.5 x 14) and 11x17, \$.25 for each page; Full Size Maps \$10.00 per page; Electronic copies \$12.00 per disk.

RESEARCH: Extraordinary requests (searching voluminous or multiple files for specific information) will be charged at a base rate of \$30.00 after the first hour.

Data Manipulation, for example, reports, maps or other products provided through manipulation is, \$50 per hour.

Payment is required upon receipt of documents/products. An advance deposit may be required for large projects. Cash, or checks made payable to El Paso County, will be accepted.

I acknowledge and agree to the above terms:

Signature: _____ Print Name: _____

TOTAL CHARGES	
_____ No. of copies @ \$.25 per page.....	\$ _____
_____ No. of copies @ \$10.00 per page.....	\$ _____
_____ Disks @ \$12.00 each.....	\$ _____
_____ Hours of research \$30 per hour.....	\$ _____
_____ Hours of Data manipulation @ \$50 per hour.....	\$ _____
TOTAL OWED:	\$ _____