



**CODE ENFORCEMENT OFFICE**  
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**VOICE (802) 863-0442**  
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**PUBLIC RECORDS REQUEST FORM**

Person Requesting: \_\_\_\_\_ Date: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Mailing address of Person Requesting: \_\_\_\_\_  
\_\_\_\_\_

Property Address (for which information is being requested):  
\_\_\_\_\_

In the space provided, please indicate the specifics of your request. Please include pertinent dates (ex: "from January 1, 2006 to December 31, 2008"). Be as specific as possible. If you need assistance in defining what you are looking for, we will be happy to help.

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

**NOTICE OF ASSOCIATED FEES for providing copies of a public record:** Pursuant to 1 V.S.A. 316 (d) and Acts 1996, No. 159 section 1, the following fees are established as the actual cost of providing a copy of a public record:

1. For staff time involved in physically duplicating a record, \$.33 per minute after the first 30 minutes.
2. For senior-level staff time, and information technology specialists' time spent extracting data from databases or performing similar tasks necessary to comply with a request to create a new public record, \$.57 per minute.
3. For any other staff time for which cost can be charged and collected under this section, \$.45 per minute.

4. **For photocopies, \$.05 per single-sided page, \$.09 per double-sided page for pages up to 8.5 by 14 inches.**
5. For color photocopies, \$1.00 per single-sided page.
6. **For computer-generated paper copies, \$.02 per page for pages up to 8.5 by 14 inches.**
7. For computer diskettes, \$.28 each for 3.5-inch diskettes.
8. For compact discs, \$.86 each for write-once CD w/case, \$2.31 each for rewritable CD w/case.
9. For audio tapes, \$.81 each.
10. For video tapes, \$1.69 each.
11. For DVD's, \$2.00 each for write-once DVD w/case, \$4.00 each for re-writable DVD w/case.

**PLEASE SIGN BELOW to acknowledge your public records request and to indicate you have read and understand the fees associated with providing copies of a public record:**

Signature of person requesting: \_\_\_\_\_

Date: \_\_\_\_\_