GRAMA
(Government Records Access and Management Act)
63-2-101 et seq., Utah Code
REQUEST FOR RECORDS

NAME __________________________________________

ADDRESS _______________________________________

STATUS (Relationship to requested record) ________________

I DESIRE: _______ ACCESS _______ COPIES

DESCRIPTION OF RECORD:

_________________________________________________________________

_________________________________________________________________

Signature ___________________ Date _______________

Daytime Phone # _______________

For Department Use Only:
Department ___________ Date Filed ___________ Fee $ ___________
Time Filed ___________

Record Classification:
Public: _______ Controlled: _______
private: _______ Protected: _______

Access Granted _______ Denied _______
Date request was completed __________________________
(If more than 10 business days, justify extension and give estimate to requester)

DEPARTMENT RECORDS OFFICER: ___________________________ DATE: _______________

Signature