

**CITY OF BIGFORK  
PUBLIC RECORDS REQUEST FORM**

This form is available at Bigfork City Hall or by contacting the City Clerk/Treasurer at [cityclerk@bigfork.net](mailto:cityclerk@bigfork.net) and may be printed, completed, and faxed to 218-743-3782, mailed to PO Box 196, Bigfork Minnesota, 56628 or delivered directly to the City Clerk/Treasurer at City Hall during regular business hours, Monday through Friday, from 8:00 a.m. to 2:00 p.m.

Requester: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Street Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Fax Number: \_\_\_\_\_

*Per Minnesota Statutes, Chapter 13.05, subd. 12, applicants are not required to identify themselves when requesting public data.*

**DESCRIPTION OF DATA REQUESTED**

**Pursuant to the Minnesota Data Practices Act, Minnesota Statutes, Chapter 13, I hereby request the following information currently existing in the records of the City of Bigfork, Minnesota. Specify the information you are requesting e.g. specific correspondence, reports, meeting proceedings or other documents, along with the approximate dates of these records. Per Minnesota Statutes, Chapter 13.05, subd. 12, applicants are not required to state a reason or justify a request for public data.**

**PREFERRED METHOD OF DELIVERY**

**COPY** I wish to receive a copy of the requested information. I understand that I must pay \$0.25 per printed page for paper copies for which the final product is 100 pages or less. I understand that for all other requests, I must pay the actual cost of fulfilling the request as permitted by the State of Minnesota. *Charges must be paid in full before any portion of the information requested is released. Make payment in cash or check or money order payable to the City of Bigfork. Per Minnesota Statutes, Chapter 13.03, subd. 3, the City can charge fees to recover costs to provide copies of data, including costs associated with searching, compiling, copying, mailing, or otherwise transmitting data. We do not charge for inspection of data or for separating non-public data from public data.*

**PICK UP** I will pick this information up when it becomes available. Please contact me at above-listed contact information when the documents are ready.

**MAIL** Please contact me at the above-listed contact information and inform me of all costs, (e.g. copies, postage, shipping, etc.) and, upon payment, mail the requested information to me at the address listed above.

**ELECTRONIC MAIL** Please e-mail and inform me of all applicable costs and, upon payment, e-mail the requested information to me at the e-mail address listed above.

**FAX** Please call and inform me of all costs and, upon payment, fax the information to me at the fax number listed above.

**NO COPIES / IN-PERSON REVIEW** I do not want copies but wish to inspect the originals of the requested information at no cost. Please contact me at the above-listed contact information to schedule a time when records will be available for viewing.

In making this request, I understand that:

- The City of Bigfork is under no obligation to create a document that does not already exist.
- The City of Bigfork is under no obligation to provide items deemed confidential under the Minnesota Data Practices Act, Minnesota Statutes Chapter 13.
- Depending on the request, it may take up to ten (10) business days or more for the City of Bigfork to fulfill this request.
- Any request will be filled on a first-come, first-served basis

Signature of Requester: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR CITY USE ONLY**

Date Received: \_\_\_\_\_ Received by (employee): \_\_\_\_\_

Action taken by City in obtaining information: \_\_\_\_\_

Disposition of request: \_\_\_\_\_

Employee releasing information: \_\_\_\_\_ Date information released: \_\_\_\_\_

Fee Received: \_\_\_\_\_