



Village of Whispering Pines

PUBLIC RECORDS REQUEST FORM

Date of Records Request: _____

Requestor Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____

Email: _____

Description of record(s) requested: _____

Format to receive record request:

1. Hard copy (paper)

2. Computer disk (CD) or other storage device (Requestor to furnish)

Note: The requestor will be notified if the documents will be provided in a format other than paper or CD.

Fees for records:

- Hard copy (\$0.10 per page)
- For non-routine requests, a special service charge may be assessed for staff time and/or for information technology resources used to research and compile records. The estimated cost will be provided before the request is started and may require a monetary deposit.

Submit completed public records request to Village Hall or email the Village Clerk at lchristopher@whisperingpinesnc.net.

For employee use only:

Received by: _____ Date received: _____

Assigned to: _____ Date assigned: _____

Estimated special service charge (if necessary): \$_____ based on _____ staff hours

Date request fulfilled: _____