

INFORMATION REQUEST #: _____

* DATE DUE: _____



CITY OF SUNRISE BEACH VILLAGE

**124 Sunrise Drive
Sunrise Beach Village, Texas 78643-9283**

Telephone (325) 388-6438
Fax (325) 388-6973
Website: <http://cityofsunrisebeach.org>
e-mail: srbv@cityofsunrisebeach.org

**Tommy Martin, Mayor
Fred Butler, Mayor pro tem**

Printed

Name of Requestor: _____
(Last Name First Name Middle Initial)

Identify Department: Police Department City Hall Personnel/Payroll Court
(Select only one department per request)

Address: _____

Phone Number: _____ Alternate Number: _____

E-mail (if any): _____

Description of Information Requested:
Provide as much detail as possible INCLUDE DATES if possible:

***Please note: The City has 10 business days to respond to your request to either provide the records and/or provide an explanation as to approximate date/time as to when the records may be reproduced. There are fees affiliated with all requests as outlined via the Texas Administrative Code (Title 1, Part 3, Chapter 70, §70.09). There are no exceptions; every individual/entity is treated equally.**

<p>OFFICE USE ONLY:</p> <p>Date Request Rec'vd: _____ By whom: _____</p> <p>Actions taken: _____</p> <p>_____</p> <p>_____</p>
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Documents ready: _____ Informed requestor: _____

Date & Time requestor picked up documents: _____

Signature/Print Items Rec'vd: _____