PUBLIC INFORMATION ACT REQUEST FORM TO BE COMPLETED AND SUBMITTED TO TOWN OF NEW WINDSOR PUBLIC INFORMATION ACT CUSTODIAN, Kimberlee Schultz at kschultz@newwindsormd.org

Date of Request____________________

Applicant’s Name

Applicant’s Address __________________________
City, State, Zip

Contact Phone Number __________________________

Applicant’s Email Address __________________________

Applicant’s Signature

Description of Requested Public Document(s):
(attach separate sheet if needed)

Choose the Form of Response:

____ Pickup (you will be notified by phone when the documents are available)
____ Mail to address above (requires pre-payment of postage costs)
____ Inspection of Documents Only
Copies of Documents - .25 per copy

The Town of New Windsor will produce the requested documents within 30 days if the documents are available. If your request is denied, you will be notified within 10 days. If the request requires more than 2 hours to research and compile, you may be charged for the employee’s time after the first 2 hours.

FOR OFFICE USE ONLY

Request No.__________________

Request: Approved_______(date)  Denied_______(date)  Completed_______(date)

Official signature