



City of Corona, California

PUBLIC RECORDS REQUEST

It is the goal of the City of Corona to comply with State law regarding disclosure of public records and/or information. Except with respect to public records exempt from disclosure by express provisions of law, the Custodian of Records shall make records promptly available to any person upon payment of fees covering direct costs of duplication or a statutory fee, if applicable. **NOTE: Not to be used for Police Department records. Please visit the Police Department at 730 Corporation Yard Way, Corona, CA 92880 to request records maintained by the Police Department.**

I/we, the undersigned, hereby request the following public records as indicated below:

INSTRUCTIONS

Type or print all information completely.

Return form to: Office of the City Clerk, City of Corona, P.O. Box 940, Corona, CA 92878-0940

Name _____

Date of Request _____

Address _____

Telephone _____

(daytime)

(include zip code)

(evening)

E-mail _____

Record(s) requested: In order to help us serve you, please check the appropriate box(es), if applicable to your request.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Agreements | <input type="checkbox"/> Alley/Street Vacations | <input type="checkbox"/> Annexations | <input type="checkbox"/> Annual Budget |
| <input type="checkbox"/> Bids & Proposals | <input type="checkbox"/> Code Enforcement/Regulations/Violations | <input type="checkbox"/> Community Development Block Grants (CDBG) | <input type="checkbox"/> Deeds/Easements |
| <input type="checkbox"/> Environmental Docs. | <input type="checkbox"/> General Plan | <input type="checkbox"/> Insurance | <input type="checkbox"/> Licenses/Permits |
| <input type="checkbox"/> Maps/Plans/Drawings | <input type="checkbox"/> Minutes | <input type="checkbox"/> Ordinances/Resolutions | <input type="checkbox"/> Personnel/Salary Info. |
| <input type="checkbox"/> Policies/Procedures | <input type="checkbox"/> Project Files | <input type="checkbox"/> Reports/Studies | <input type="checkbox"/> Tapes, Audio/Video |
| <input type="checkbox"/> Other | | | |

Description (i.e., subject, origination date, involved parties, etc.) _____

I would like to view the requested record(s).

I would like copies of the requested record(s).
Number of copies: _____

Note: In accordance with City of Corona Resolution No. 2010-059, a copying fee of 60 cents per page will be charged.

FOR OFFICE USE ONLY

If request is not filled, state reason: _____

If a member of the public requires assistance, indicate how much time spent in assisting the individual to identify records and information that may be responsive to a request: _____

Signature _____

Title _____

Date _____