

CENTRAL COUNTY WATER CONTROL DISTRICT PUBLIC RECORD REQUEST FORM

STEP 1. PRINT & COMPLETE all information. Please date and sign the request.

STEP 2. SUBMIT completed form to Central County Water Control District administrative office at Central County Water Control District 475 S. Cabbage Palm Street, Clewiston, Florida 33440.

STEP 3. PAY FEE if applicable. Once you have received a notice of estimated cost, submit fees by cash, cashier's check or money order payable to Central County Water Control District. If payment is not received within 10 working days after notice of the estimated cost is forwarded, it may be necessary to initiate a new request. **PUBLIC RECORDS ARE NOT RELEASED BEFORE FEES ARE PAID.**

COMPLETE BELOW:

LAST NAME: _____ FIRST NAME: _____
MIDDLE INITIAL: _____
NAME OF ORGANIZATION/COMPANY _____
MAILING ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE _____
TELEPHONE: () _____ FAX: () _____
E-MAIL: _____ @ _____

Description of Records Requested (Type or Print): To expedite the request, be as specific as possible. You may attach additional pages to the form as necessary. Clearly mark any attachments.

Delivery information-Check appropriate circle below. Costs for producing the requested information shall be paid in advance of delivery of viewing of records.

- Make public records available for viewing.** The requestor will be notified when records are available for review at the Central County Water Control District Administrative Offices. There is no cost to view the public

- record unless fees apply for the extensive use of information technology resources or extensive clerical or supervisory assistance.
- **Make copies for pick up by requestor.** The requestor will be invoiced and must pay for the copies before the copies are released.
 - **Make copies and mail to requestor.** The requestor will be invoiced and must pay for copies before the copies are released.
 - **Make copies and fax to requestor.** The requestor will be invoiced, and the requestor must pay for the copies before the copies are released.

**SUBMISSION OF REQUEST IS CERTIFICATION THAT
REQUESTOR UNDERSTANDS AND ACCEPTS
OBLIGATION TO PAY APPLICABLE FEES FOR COPIES
OR RECORDS REQUESTED ANT THAT NO COPIES MAY
BE RETURNED FOR CREDIT.**

**SIGNATURE OF
REQUESTOR:** _____

If submitted electronically, signature and date on line above unnecessary.