



City of Krugerville
5097 Hwy 377
Krugerville, TX 76227
P: 940-365-5833
F: 940-365-5834

Open Records Request

Date: _____

Name: _____

Address: _____

Phone: _____

Email address: _____

Signature: _____

Information requested under the Texas Open Records Act, Texas Government Code, Chapter 552. Please be specific or clarification will be required.

1. _____
2. _____
3. _____
4. _____
5. _____

Copies will be \$.10 for each page, up to 50 pages. For 50 or more pages, the charge shall be \$.10 for each page, plus personnel time (standard size copies, non-standard size copies cost more

- Active records must exist; no compiling or creation will be made.
- Information requiring extensive research will be charged \$15.00 per hour.
- Do you wish to be notified of the estimated time for research? Yes___ No___
- Are you willing to pay for the necessary time to research this request? Yes___ No___
- If no, please explain. _____

The City will strive to furnish all information that is approved within ten (10) business days, depending upon the workload of employees and complexity of the request.

Approved by: _____ Date: _____

Date available for review or pickup: _____ Notified: _____ AGO Request: _____

Copies picked up by: _____ on _____ Cost: \$_____