TOWN OF HOLLYWOOD PARK
Public Records Request form
#2 Mecca Drive, Hollywood Park, TX 78232
Phone (210) 494-3575 Fax (210) 494-5910

Requestor's Name: _____ Telephone: _____
(Please Print)

Address: _____
(Please Print) House number and street City State Zip

I understand that:

1. My request is limited to the information in existence at the time and on the day my request is received.
2. The City has no duty to answer questions or create documents to respond to a request pursuant to the Texas Public Information Act, but if I ask a question, the City will make a diligent effort to determine whether there is information responsive to my question in its records and respond.
3. Certain information held by the City may be confidential as a matter of law, or may be excluded from public disclosure when applying various provisions of the Texas Public Information Act.

Therefore, to assist in processing you request, please choose Option A or Option B below:

OPTION A - Initial:_____, ***I hereby agree to limit the scope of my request*** to only those documents/information contained in the City's records that the City believes in non-confidential and available to the public pursuant to the Texas Public Information Act or any other applicable law. I will accept documents/information with certain information redacted on this basis and consider my request completely fulfilled. I understand that if I am not satisfied with the information provided under this basis, that I can make a new request at any time which includes the redacted information and the City will seek an opinion of the Texas Attorney General regarding whether the redacted information sought in the new request can be excluded from public disclosure as explained in Option B.

OPTION B - Initial:_____, ***I do not agree to limit the scope of my request.*** I want all available documents regardless of whether the City considers the information to be confidential or subject to being excluded. I understand that the City has the duty to seek an opinion from the Texas Attorney General's Office, Open Records Division which will consist of the following:

1. A written request for an opinion from the Texas Attorney General by the City with in ten **(10)** business days (excluding weekends & holidays recognized by the City) from the date that the City received my initial request;

2. A written brief sent to the Texas Attorney General's Office within fifteen **(15)** from the date that the City received my initial request;

3. I might receive a request for clarification of my request if it is vague and ambiguous which will toll (postpone) the deadline for the City's request for an opinion from the Texas Attorney General's Office,

4. A waiting period of up to forty-five **(45)** days for the Texas Attorney General's Office to render an opinion from the date they receive the written brief. I understand that until an opinion is rendered the City cannot fully respond to my request until a final decision is made by the Texas Attorney General's Office regarding my request. I understand that the Texas Attorney General may rule that the information can or cannot be released and I understand that the City may disagree with the opinion provided by the Texas Attorney General's Office. In such cases, the City may seek a decision from a Travis County District Court or higher court, before records are released.

This is a double sided request from; both sided must be completed (continued on reverse side).

I understand that the documents/information held by a Court, whether a Justice Court, City Court, or District Court are Judicial Records and are not subject to disclosure pursuant to the Texas Public Information Act. Any request for records made for judicial records will be handled pursuant tot he Judicial Records Act and will not be considered a request pursuant to the Texas Public Information Act.

Description of Information Requested:

_____

_____

Requestor's Signature: _____ Date: _____

Written request attached: ☐ Yes ☐ No

☐ **Cost per page standard size up to 8.5" x 14**	**$.10 / page**	**# Pages_____**
☐ Non standard sizes	$.55 / page	# Pages_____
☐ **VHS Video cassette**	**$2.50 each**	**# _____ $_____**
☐ Audio cassette	$1.00 each	# _____ $_____
☐ CD and DVD	$1.00 each	# _____ $_____
☐ Personnel Cost for more than 50 pages	$15.00 / hour	# Hours_____
☐ **Postage**	**Actual Cost**	**Cost $_____**
☐ Other Cost	Actual Cost	Cost $_____
☐ **Overhead charge (20% of Personnel Charges)**		**Charge $_____**
☐ Police Report	.10 Cents a page	# _____ $_____
☐ Accident Report	$6.00	
☐ E-mailed	Date: _____	**NO CHARGE**

_____

For City Use Only

_____

Request received by: _____ Date: _____

Notes/Comments: _____

_____

Fees waived in Accordance with procedures: ☐ Yes ☐ No

City personnel spent complying with this request: _____ Initials: _____

Released by: _____ Date: _____

Total Charge:$_____