



Sutton County Underground Water Conservation District

OPEN RECORDS REQUEST FORM

Applicant Information

Full Name: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ Email: _____

Business/Agency Representing: _____

Signature & Date of Request: _____

Request Information

Please let us know if you wish to receive your response in a special format or media. Additionally, certain items requested may be accepted from disclosure under the law and the District may assess costs for providing copies of requested information.

Under the Public Information Act, Pursuant to Texas Government Code Chapter 552, I request the following:

Submit this request to Meredith Allen, Operations Manager.

Phone: 325-387-2369

Email: opmanager@suttoncountyuwcd.org

Fax: 325-387-5737

THIS SECTION TO BE COMPLETED BY DISTRICT PERSONNEL:

Date Received: _____ Est. Completion Date: _____

Records Available: YES NO (Circle One)

Reason for Non- Availability: _____

Other Information: _____

Person Completing Records Request: _____