



Public Records Request Form Page 1 of 2

Town of Wright

395 Lariat Way

P.O. Box 70

Wright, WY 82732

To Be Completed By the Requestor:

Name:	Click or tap here to enter text.	Click or tap here to enter text.	Today's Date:	Click or tap to enter a date.	
	Last	First			
Mailing Address:	Click or tap here to enter text.		Click or tap here to enter text.		
	Street Address		Apartment/Unit #		
	Click or tap here to enter text.		Click or tap here to enter text.	Click or tap here to enter text.	
	City		State	Zip Code	
Company:	Click or tap here to enter text.		Fax: Click or tap here to enter text.		
Phone:	Click or tap here to enter text.	E-mail Address:	Click or tap here to enter text.		
Request Made: (Please Check)	In Person <input type="checkbox"/>	In Writing <input type="checkbox"/>	By Email <input type="checkbox"/>	Telephone <input type="checkbox"/>	Fax <input type="checkbox"/>
Delivery Method Preferred: (Please Check)	Copies <input type="checkbox"/>	Mailed <input type="checkbox"/>	Emailed <input type="checkbox"/>	Pick Up <input type="checkbox"/>	Inspection <input type="checkbox"/>

Description of Public Records Information Requested: *Please be descriptive and thorough as possible.*

Click or tap here to enter text.

Purpose of: (Please Check one below)

<input type="checkbox"/> Personal	<input type="checkbox"/> Commercial	<input type="checkbox"/> Litigation
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The Town of Wright will attempt to provide the information requested within reasonable time. Please note that some requests may require additional research that may prolong the amount of time in which you will receive your request. If an extended request period is anticipated, you will receive notification of the possible completion date.

If the request is urgent, please identify the date desired: Click or tap to enter a date.

Identifying this target does not guarantee that your request will be granted by this date.



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Town of Wright, Wyoming Public Records Request Procedures and Fee Schedule are set out in detail in the Wright Town Code, available at Town Hall or online at http://wrightwyoming.com/view_town_code.aspx

I understand there may be charges for the duplication of these records. I agree to pay all applicable fees and charges for the requested information as identified in the above fee schedule, or any costs to contract out duplication services.

Payment must be received before the request will be released. Payment must also be received in advance for requests estimated at a cost over \$20.00 or requiring more than two hours of research time.

Signature:	Click or tap here to enter text.	Date:	Click or tap to enter a date.
Print Name:	Click or tap here to enter text.		
Company:	Click or tap here to enter text.		

OFFICE USE ONLY

Request Granted

Date Received:	____/____/____	Request Completed:	____/____/____
Approval for Release of Records:	_____ Signature	Date:	____/____/____

Fees

Summary of Fees:

Description*	Amount	Cost	Description*	Amount	Cost
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
Total:					\$

Request Denied

Date Received:	____/____/____	Request Completed:	____/____/____
Denial of Release of Records:	_____ Signature	Date:	____/____/____

The Town of Wright is denying inspection or copying of some or all of these records. Access is denied pursuant to law, including Wyoming State Statutes §16-4-201(a) (v) to §16-4-204, attached to this form, identifying information as non-disclosable.

Reason for Withholding: