

City of Monahans Open Records Request Form

If you have questions regarding the Texas Public Information Act, please contact the Office of the Texas Attorney General at toll-free (877) 673-6839 or visit their website at www.oag.state.tx.us.

FOR DEPARTMENT USE ONLY:

RECEIVED BY: _____

DATE RECEIVED: _____

NOTICE: THIS FORM IS TO BE COMPLETED BY THE REQUESTOR ONLY. UPON RECEIPT OF A REQUEST FOR INFORMATION THE CITY OF MONAHANS HAS TEN (10) BUSINESS DAYS IN WHICH TO RELEASE THE INFORMATION TO THE REQUESTOR OR REQUEST AN OPEN LETTER RULING FROM THE TEXAS ATTORNEY GENERAL.

Section One: Requestor Information

Requestor Name: _____ Phone Number: _____

Company/Organization: _____

Requestor's Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Section Two: What records are you requesting?

Describe the **exact** information you are requesting. Include any details that may help us locate the information. Please do not ask questions. The City is under no obligation to answer any written questions or create any document in response to an open records request.

Section Three: Confidential Information

Please be advised that confidential information is often included in documents held by the City of Monahans and the City of Monahans Police Department. The City may not be able to release this information. The Texas Public Information Act (codified at Texas Gov't Code Chapter 552) requires a governmental entity to request an open letter ruling from the Texas Attorney General prior to withholding information that is confidential. The Attorney General's Office has 45 days to respond to a request for an open letter ruling. Please check the box below if you are willing to receive only non-confidential information and expedite this request.

Please send me only non-confidential information. I understand that some records may be redacted to withhold confidential information. This information includes, but is not limited to: Texas driver's license numbers, Social Security numbers, confidential account information, addresses, and telephone numbers.

I certify that I am the person listed as requestor:

Signature of Requestor
(Digital form, printed name considered signature.)

Date: _____

Return this form to:
City of Monahans
Attn: Public Information Act Coordinator
112 W. 2nd Street
Monahans, TX 79756
Email: city-secretary@cityofmonahans.org
Fax#: 432-943-7300

