



CITY OF BAY CITY
REQUEST FOR DISCLOSURE OF PUBLIC RECORDS
(Public Information Act – Texas Government Code, Chapter 552)

Every effort is made to expedite all requests for disclosure of public records. The City will respond to your request within ten (10) working days; however, due to personnel demands, schedules and type of information requested the disclosure of records may take longer as allowed by law.

Name (Print): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_
(Where you can be reached M-F, 8-5)

Email: \_\_\_\_\_

Pursuant to Chapter 552 of the Texas Government Code ("Texas Public Information Act"), I hereby request the following information currently existing in the records of the City of Bay City, Texas:

Description of Requested Record (Please be as specific as possible with type, dates, etc.): [ ] Review [ ] Copies [ ] Audio

In making this request, I understand that the City of Bay City is under no obligation to create a document to satisfy my request or to comply with a standing request for information. I further understand that the information will be released only in accordance with the Texas Public Information Act, which may require a determination as to confidentiality by the Texas Attorney General prior to a release. I further understand that the City of Bay City has 10 business days in which to request such a determination (excluding weekends and holidays recognized by the City).

Therefore, to assist in processing my request, I choose the following option (please choose Option A or Option B below):

OPTION A - Initial: \_\_\_\_\_, I hereby agree to limit the scope of my request. I want only those documents/information contained in the City's records that the City believes is non-confidential and available to the public pursuant to the Texas Public Information Act or any other applicable law. I will accept documents/information that may have 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 within ten (10) business days (excluding weekends & holidays recognized by the City) from the date that the City receives my request;
2) A written brief sent to the Attorney General's Office within fifteen (15) days from the date that the City received my request;
3) A waiting period of up to forty-five (45) days for the 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 the Matagorda County District Court or higher court, before records are released.

I might receive a request for clarification of my request if it is vague and ambiguous, which will postpone the deadlines referenced above.

Requestor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**ADMIN / OFFICIAL USE ONLY**

<p>TO: _____                  The information requested above is information pertinent to your department. This information is to be returned to the City Secretary by _____ for disclosure to the requestor, along with this original request.</p> <p>NOTE: Should there be a reason this information cannot be furnished in the time frame requested, please so note below and return this form to the City Secretary.</p> <p>_____</p> <p>_____</p> <p>Signature of Department Director required _____ Date _____</p>	<p>Date/Time Faxed/Delivered to Department: _____</p> <p>Date/Time Returned from Department: _____</p>
<p>REVIEWED BY CITY SECRETARY OR DESIGNEE ON _____</p> <p>APPROVED FOR DISCLOSURE: ____ YES ____ NO (State Reason)</p> <p>REASON FOR NON-APPROVAL: _____</p> <p>_____</p> <p>SIGNATURE OF CITY SECRETARY OR DESIGNEE: _____</p> <p>Date _____</p>	<p>Date Received: _____</p> <p>Time Received: _____</p>
<p>REQUIRES REVIEW BY CITY ATTORNEY: ____ YES ____ NO</p> <p>CITY ATTORNEY APPROVED FOR DISCLOSURE: ____ YES ____ NO (State Reason)</p> <p>REASON FOR NON-APPROVAL: _____</p> <p>_____</p> <p>_____</p> <p>DATE OF APPROVAL BY CITY ATTORNEY: _____</p> <p>SIGNATURE OF CITY ATTORNEY: _____</p>	<p>Date/Time Faxed to City Attorney: _____</p> <p>Date/Time Returned from City Attorney: _____</p>
<p>DATE DISCLOSED: _____ RELEASED BY: _____</p> <p>FEES: \$ _____ RECEIPT # _____</p>	