



## PUBLIC RECORDS REQUEST

All fields marked with \* are **required** fields.

**PROCESSING TIME: 3-14 BUSINESS DAYS**

Are you aware of any current litigation on this property in which the City of Tempe is a named party? Yes \_\_\_ No \_\_\_

(Note: If "yes", this request will be forwarded to the City of Tempe City Attorney's office for processing.)

**Request is for the following information:**

*Project Name: _____	
*Property Address(es) (if commercial property, please include business name(s) and suite number(s), if any):	
VIEW ONLY	REQUESTING COPIES
<input type="checkbox"/> Permit Number(s):	<input type="checkbox"/> Permit Number(s): <input type="checkbox"/> EN Number(s)
<input type="checkbox"/> PC Number(s):	<input type="checkbox"/> PC Number(s):
<b>NO RESEARCH FEE REQUIRED FOR THIS SECTION ONLY</b>	<b>NO RESEARCH FEE REQUIRED FOR THIS SECTION ONLY</b>
<input type="checkbox"/> Certificate of Occupancy	<input type="checkbox"/> Certificate of Occupancy
<input type="checkbox"/> Property Record Cards	<input type="checkbox"/> Property Record Cards
<b>RESEARCH FEE APPLIES</b>	<b>RESEARCH FEE APPLIES</b>
<input type="checkbox"/> Building Plan(s)	<input type="checkbox"/> Building Plan(s)
<input type="checkbox"/> Planning and Zoning Documents	<input type="checkbox"/> Digitized/Electronic (if available)
	<i>(Must complete "Owner Authorization" on reverse)</i>
	<input type="checkbox"/> Planning and Zoning Documents
	<b>Private Development</b>
	<input type="checkbox"/> As Builts <input type="checkbox"/> Drainage Reports
<b>DESCRIPTION OF REQUEST</b> (Please specify what you want to see, i.e.: site plans, shell building plans, tenant improvement plans, electrical sheets only, architect's name, water, sewer, grading plans, reports, etc.)	

\*Pursuant to A.R.S. §39-121.03, the applicant certifies that said documents (check one):

<input type="checkbox"/>	Will not be used for a commercial purpose.
<input type="checkbox"/>	Will be used for a commercial purpose. <i>(Must complete "Statement of Commercial Purpose" on reverse).</i>

**My contact information is as follows:**

* Requester Name:		* Date:	
* Requester Address:			
* Requester Phone Number:		* Requester Fax Number:	
* Requester Signature:		* Email Address::	

**For Department Use Only**

Received by: \_\_\_\_\_ Date Received: \_\_\_\_\_ No. of Copies: \_\_\_\_\_ Fee Due: \_\_\_\_\_

**STATEMENT OF COMMERCIAL PURPOSE AND PRICING COMPUTATION WORKSHEET**

If the records requested will be used for a *commercial purpose*\* you must complete the statement below.

\*Commercial purpose is defined as the use of a public record for the purpose of:

1. sale or resale or for the purpose of producing a document containing all or part of the copy, printout, or photograph for sale, or
2. obtaining of names and addresses from such public records for the purpose of solicitation, or
3. for any purpose in which the purchaser can reasonably anticipate the receipt of monetary gain from the direct or indirect use of such public record.

**A \$40.00 non-refundable research fee is REQUIRED at the time of submittal.**

**Notice:** A person who obtains a public record for a commercial purpose without indicating the commercial purpose or who obtains a public record for a noncommercial purpose and uses or knowingly allows the use of such public record for a commercial purpose or who obtains a public record for a commercial purpose and uses or knowingly allows the use of such public record for a different commercial purpose or who obtains a public record from anyone other than the custodian of such records and uses it for a commercial purpose *shall in addition to other penalties be liable to the state or the political subdivision from which the public record was obtained for damages in the amount of three times the amount which would have been charged for the public record had the commercial purpose been stated plus costs and reasonable attorney fees or shall be liable to the state or the political subdivision for the amount of three times the actual damages if it can be shown that the public record would not have been provided had the commercial purpose of actual use been stated at the time of obtaining the records.* A.R.S. §39-121.03(C)

The specific information which will be utilized from the record(s) requested is:

\_\_\_\_\_

This will be used for:

1. Sale or resale to \_\_\_\_\_ (identify market) for \$\_\_\_\_\_ (price or cost) per \_\_\_\_\_.
2. Producing a document, information or other material containing all or part of the information in the public record (describe document or material and price): \_\_\_\_\_
3. Solicitation to \_\_\_\_\_ (identify market) for \_\_\_\_\_ (what purpose) or \$\_\_\_\_\_ (price).
4. Soliciting a business or commercial relationship (describe and give price or value): \_\_\_\_\_
5. Other purpose (describe and give price or value): \_\_\_\_\_

I agree to pay all necessary fees related to this request for records. (Please see Community Development Copy Fee Schedule.)

\*Requester Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OWNER AUTHORIZATION - REQUIRED ONLY IF YOU ARE REQUESTING COPIES OF PLANS**

Building Plans are typically copyrighted. **We require the permission of the copyright owner or property owner to obtain copies of building plans.** Please indicate below which applies:

- \* I am the **owner of copyright** requesting copies of building plans.
- \* I am the **owner of subject property or owner's representative** requesting copies of building plans.
- \* I am **other** (no relationship to owner, architect or engineer) requesting copies of plans with the subject **property owner's consent** as indicated by the owner's signature below.

\*Owner Name: \_\_\_\_\_ \*Owner Phone Number: \_\_\_\_\_

\*Owner Address: \_\_\_\_\_

\*Owner Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_