

COMMUNITY AND DEVELOPMENT SERVICES (CDS) REQUEST FOR
REPRODUCTIONS OF PUBLIC RECORDS

CDS Req No. _____

1. GENERAL RECORDS REQUEST

1. Applicant Information - All sections are to be completed by Applicant.

APPLICANT NAME: _____

FIRM NAME: _____

ADDRESS: _____

CITY/STATE/ZIP _____

PHONE No. _____

(____) _____ FAX(____) _____

2. Records Requested - Please describe the records being requested. Attach additional pages if required.

Is request for a record in an electronic format? Yes, No Don't Know-to be determined by CDS.

3. Purpose of request for public records. Also Check Box A,B,C or D.

Complete this section if you are obtaining the records for a **Client**.

FIRM/AGENCY: _____

CONTACT: _____

ADDRESS: _____

CITY/ST/ZIP: _____

PHONE No. (____) _____ FAX(____) _____

A. **COMMERCIAL** - All or any part of the records requested will be used directly or indirectly for sale, resale; solicitation, rent or lease of a service, or any use by which the user expects a profit either through commission, salary, or fee. Applicant requesting a public record for commercial purpose shall provide a certified statement with this request stating the commercial purpose for which it shall be used. Applicant's signature must be notarized. (Go to Section II, No. 1.)

PROJECT NAME: _____

PURPOSE OF THE REQUEST: _____

B. EXEMPTION FROM COMMERCIAL PURPOSE - Records requested shall be used for publication, broadcast, or other related use of a public record by a newspaper or periodical or use of a public record by a radio or television station in its news or other information programs. Applicant's signature must be notarized. (Go to Section II, No. 2.)

C. EXEMPTION FROM COMMERCIAL PURPOSE - Records requested shall be used in the preparation for prosecution or defense of litigation, or claims settlement by the parties to such action, or attorneys representing the parties per Case and Action Number _____
_____. (go to Section II, No. 2.)

D. EXEMPTION FOR NON-COMMERCIAL PURPOSE - All or any part of the records requested will **not** be used directly or indirectly for sale; resale; solicitation; sale, rent; or lease of a service or any commercial venture. (go to Section II, No. 2.)

THE APPLICANT WHO OBTAINS PUBLIC RECORDS AND FAILS TO COMPLY WITH KRS CHAPTER 61 WILL BE LIABLE TO HCCPC FOR THE DAMAGES EQUAL TO **THREE TIMES** THE AMOUNT THAT WOULD HAVE BEEN CHARGED FOR THE PUBLIC RECORD IF THE ACTUAL COMMERCIAL PURPOSE FOR WHICH IT HAS BEEN OBTAINED OR USED HAD BEEN STATED, COSTS AND REASONABLE ATTORNEY'S FEES AND ANY OTHER PENALTY ESTABLISHED BY LAW.

2. APPLICANT'S CERTIFIED STATEMENT

1. **Commercial Request**

I, _____, do hereby certify that the records requested will be
(Print Name)
used for the commercial purpose as described in Section 1. No. 3.

(Signature)

Subscribed and sworn to before me this _____ day of _____, 20____, by
_____, who acknowledged that the statements
contained herein are true and correct.

My Commission expires ___ / ___ / ___ NOTARY PUBLIC _____

2. **Non-Commercial Request**

I, _____, do hereby certify that the records requested will be
(Print Name)
used for a non-commercial purpose as described in Section 1. No. 3.

(Signature)

CDS USE ONLY

III. OPEN RECORDS TRACKING

1. FEES

COMMERCIAL PURPOSE

COPYING CHARGE \$ _____

DATABASE \$ _____

GIS \$ _____

NON-COMMERCIAL \$ _____

STANDARD \$ _____

NON-STANDARD \$ _____

2. TRACKING INFORMATION

CDS LOG BOOK No. _____ DATE RECEIVED ____ / ____ / ____

DATE: ISSUED DENIED ____ / ____ / ____

REASON FOR DENIAL _____

PROCESSED BY: _____

IV. RETURN ADDRESS - Completed request Form Should Be Returned To:

Geographic Information Systems
or Related Digital Data/information:

For Other Requests:

GIS Department
Community and Development
Services
710 S. Main St.
P.O. Box 1125
Hopkinsville, KY 42241-1125
FAX 270-887-4019

Office Manager
Community and Development
Services
710 S. Main St.
P.O. Box 1125
Hopkinsville, KY 42241-1125
FAX 270-887-4019