

PUBLIC RECORD REQUEST

APPLICANT INFORMATION	
Applicant's Name: <i>(Individual or Organization)</i>	
Mailing Address:	
Phone(s):	Email:
Contact person's name: <i>(If an organization is requesting the records.)</i>	
Email:	Phone:
Mailing Address:	

PROPERTY INFORMATION	
Address: <i>(The address in which you are requesting records for.)</i>	
Description of records you are requesting: <i>(Failure to adequately describe the records may result in a delay.)</i>	
Reason for request:	
Please check one: <input type="checkbox"/> Paper copies <input type="checkbox"/> Email of PDF	
Fees: 8.5x11 B&W: \$0.05 per page 11x17 B&W: \$0.25 per page 24x36 B&W: \$5.00 per page 8.5x11 Color: \$0.25 per page 11x17 Color: \$0.50 per page 24x36 Color: \$10.00 per page Note: Some requests can take up to 30 days to fulfill, as materials may be located in offsite storage.	

The undersigned hereby accepts obligation to pay applicable fees for copies of records requested and that no copies be shall returned for credit.

Signature of Applicant: _____ **Date:** _____

Application continues on reverse side of page: →

FORMS OF PAYMENT ACCEPTED:

- Exact cash
- Check *(Make payable to Boardman Township)*
- Credit *(Visa, MasterCard, or Discover)*
(Note: If you pay via credit or debit card, your statement will include a separate 2.95% or \$2.50 minimum service fee with this transaction. This fee is assessed by the credit card processor, not the Township)

PLEASE MAIL COMPLETED APPLICATIONS TO:

Boardman Township Zoning Department
8299 Market Street
Boardman, Ohio 44512

OR EMAIL:

Joe Macomber at jmacomber@boardmantwp.com

REVISED: 1/15/2020