



City Clerk's Office  
 City of Rialto  
 150 So. Palm Ave.  
 Rialto, CA. 92376 (909)820-2519  
[cityclerk@rialto.ca.gov](mailto:cityclerk@rialto.ca.gov)

# Public Records Request

**Pursuant to the California Public Records Act, please allow 10 days to comply with your request. There will be a charge of \$.25 per page for all paper copies. No charge for emailed copies.**

USE BLACK INK ONLY - DO NOT HIGHLIGHT

PRINT LEGIBLY OR TYPE ALL INFORMATION

ABOVE SPACE IS FOR OFFICE USE ONLY

## Instructions

All requests should be made in writing and signed. Information with an asterisk (\*) is required. Incomplete requests will not be honored.

## Section A - Record(s) Requested

Describe the record(s) you are requesting. Please be as specific as possible and include enough detail to assist City Clerk staff in locating the record(s) *example*: permits for address 150 So. Palm Ave. (Include relevant dates or date range.)

## Section B - Requester Information

Your Name\*   Mr.  Mrs.  Ms. Other

Phone\*  Fax  Email

Business Name

Mailing Address\*

City\*  State\*  Zip Code\*

## Section C - Receiving Record(s)

Please specify the preferred method of receiving the requested record(s).

By postal mail at the mailing address above  Special Delivery - please specify; additional charges will apply

By email at the email address above. No Charge

In person. .25 cents per page

By signing below I certify that the information above is true and correct to the best of my knowledge. I understand that copy fees may apply and that records will not be released until payment is received.

**X**

Requester Signature - Required

Date

Required