



SOUTH CENTRAL MICHIGAN CONSTRUCTION CODE INSPECTION, INC.

113 S. CAPITOL AVE., P.O. BOX 509, ATHENS, MI 49011
PHONE: 269-729-5355 OR TOLL FREE: 1-888-249-7077
Fax: 269-729-5359

REQUEST FOR PUBLIC RECORD

NAME _____ REQUEST WRITTEN _____

ADDRESS _____

PHONE _____ DATE FILED _____

I request to have the public record(s) supplied to me in the following forms:

Inspection _____ Copies _____

Name and brief description identifying public record desired:

PAYMENT MUST BE RECEIVED PRIOR TO DELIVERY OF PUBLIC RECORD (S).

Delivery to the above address? _____

List alternate, if applicable _____

I understand a public body must respond to my request within five (5) business days after it is received. The public body must grant or deny all or a portion of my request, or issue a notice extending for ten (10) business days, the period in which the public body must respond to my request. In place of these deadlines, I agree to allow the public body a reasonable time to process by request.

Signature _____

OFFICE USE ONLY BELOW THIS BOX

Cost: In advance (over & 50.00)

Final Account

Estimate _____

Mailing _____

Labor _____

___ copies @.10 _____

other _____

TOTAL (\$3 minimum) _____

Date Available _____

(-) deposit _____

AMOUNT DUE(round to nearest dollar) _____