



210 S. Lexington Ave. Wilmore, KY 40390
(859) 858-4411
dback@wilmore.org

OPEN RECORDS REQUEST FORM

First Name: _____

Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-mail (optional): _____

Business Hours _____

Telephone: _____

Preferred Delivery:	<input type="checkbox"/> Pick Up	Do you meet the residency requirement as defined in KRS 61.870(10)? _____
	<input type="checkbox"/> U.S. Mail	Is this request for commercial purpose as defined by KRS 61.870(4)? _____
	<input type="checkbox"/> On-site Inspection	

Records Requested:

(to expedite the request, be as specific as possible in describing the records being requested. Also please include the type of access requested (copying or inspection))

Signature: _____ Date: _____

(must be signed to be a valid request under the Kentucky Open Records Act)

**** FOR AGENCY USE ONLY ****

Received by: _____ Date: _____ Time: _____

Records Provided: _____

Disposition Notes: _____

1. This form should only be used to submit records requests to the **City of Wilmore**.
2. In order to request access to government records under OPRA, you must complete all the required portions of and date this request form and deliver it in person during regular business hours or by mail or fax to the Records Custodian. Your request is not considered filed until the Records Custodian has received a completed, signed request form or signed written notification. If you submit the request form to any other officer or employee of the **City of Wilmore**, that officer or employee may not have the authority to accept your request form on behalf of the **City of Wilmore** and your request will be directed to the Records Custodian.
3. The fees for duplication of a government record are \$0.10 per page, \$0.50 per CD/DVD, and \$2.50 per USB. We will notify you of any special charges, special service charges, or other additional charges authorized by State law or regulation before processing your request. Payment shall be made by check or money order payable to the **City of Wilmore**.
4. If it is necessary for the records custodian to contact you concerning your request, providing identifying information, such as your name, address, and telephone number or an email address is required.
5. You may be charged a minimum 50% deposit when a request for copies exceeds \$25. The Records Custodian will contact you and advise you of any deposit requirements. You agree to pay the balance due upon delivery of the records.
6. The Records Custodian may deny access to a person who has been convicted of an indictable offense in Kentucky, any other state, or the United States, and who is seeking government records containing personal information pertaining to the person's victim or the victim's family.
7. By law, the **City of Wilmore** must notify you that it grants or denies a request for access to government records within five business days after the custodian of the record requested receives the request, provided that the record is currently available and not in storage. If the record requested is not currently available or is in storage, the custodian will advise you within five business days when the record can be made available and the estimated cost. You may agree with the custodian to extend the time for making records available, or granting or denying your request.
8. You may be denied access to a government record if your request would substantially disrupt agency operations and the custodian is unable to reach a reasonable solution with you.
9. If the **City of Wilmore** is unable to comply with your request for access to a government record, the custodian will indicate the reasons for denial on the request form and send you a signed and dated copy, within five business days.
10. If your request for access to a government record has been denied or unfilled within the time permitted by law, you have a right to challenge the decision by the **City of Wilmore** to deny access. At your option, you may file a complaint in writing with the Office of the Attorney General for the Commonwealth of Kentucky. You may contact the Attorney General by telephone at (502) 696-5300, by mail at The Capital, Suite 18, 700 Capital Ave., Frankfort, KY 40601-3449, by email, or at their website. The Attorney General's Office can also answer other questions about the law.