

CITY OF KEMMERER
ADMINISTRATIVE SERVICES DIRECTOR'S OFFICE
OFFICIAL POLICY ON REQUEST FOR PUBLIC RECORDS

(Resolution no. 2016-718 passed 3/14/2016)

WHEREAS, the City Clerk of the City of Kemmerer, Wyoming, is the custodian of the public records; and

WHEREAS, Wyo. Stat. §16-4-204 provides that in cases in which a person has the right to inspect and copy any public records that he or she may request copies, or printouts for a reasonable fee to be set by the official custodian; and

WHEREAS, Wyo. Stat. § 16-4-204 further requires that any fees or charges by a custodian of a public record shall be authorized by the City Council; and

WHEREAS, the City is recommending fees, charges and a public records policy be adopted by the Governing Body for the public record request as outlined in Exhibit A, which is attached hereto and incorporated herein.

NOW, THEREFORE, BE IT RESOLVED by the Governing Body of the City of Kemmerer, Lincoln County, Wyoming, that the foregoing recitals are incorporated in and made a part of this resolution by this reference and that the attached Fee Schedule as outlined in Exhibit A is adopted and becomes effective immediately.

The following shall be the procedure for requesting any allowed public records from the City of Kemmerer:

1. A written request must be made to the custodian of the records. The City Clerk is the custodian of records for the City of Kemmerer with the exception of Police Department and Kemmerer Municipal Court records.
2. The custodian of records for the Police Department is the Police Chief. The custodian of records for the Kemmerer Municipal Court is the Municipal Court Clerk.
3. The written request shall provide the name, signature, address, and telephone number(s) of the person requesting review of public records. Records shall be identified as accurately as possible. A form is available in the office of the City Clerk or online at www.kemmerer.org.
4. Payment of all associated fees of a public records request shall be paid in advance of preparation and delivery of the public records. The custodian of records shall provide the requesting party with an estimate of all costs prior to any research, assembly, or delivery of requested records.
5. Determination whether a document constitutes a "public record" and may be released for inspection shall be made pursuant to the provisions of the Wyoming Public Records Act, W.S. 16-4-201 et seq. The records will be compiled by the custodian of the record and then will be reviewed by either the City Administrator or the City Attorney to verify that the records may be released to the public.
6. If the request to inspect is denied, the custodian of records shall provide a written explanation of the denial pursuant to W.S. 16-4-203(e).

**THIS FORM MUST BE SIGNED BY REQUESTER
(Please print)**

Requester's Name: _____

Mailing Address: _____

Daytime telephone: _____ Date: _____

E-mail address: _____

PLEASE BE VERY SPECIFIC REGARDING YOUR REQUEST!

I am requesting to () view () copy the following record(s)
Of the City of Kemmerer:

Signature: _____

Date: _____

_____ Records are considered public records – okay to copy or view.

_____ Records are not to be copied or viewed by public.

Signature: _____
Kemmerer City Administrator or Kemmerer City Attorney

Date: _____

Request () approved () denied

Public Records Fees:

All estimated fees must be paid before record search is conducted. If additional fees are required, these must be paid before the records are released. Research fees will include any opinions from the City attorney regarding whether or not something is a public record.

Type of record	Fee	Number of pages	Total fee
Fax and copies, black and white	\$0.25 per page		
Fax and copies, color	\$0.50 per page		
Copy media, CD or DVD	\$5.00 per disc (media supplied by city)		
Additional research fees (in addition to any of the other fees)	\$25 per hour (the first ½ hour is at no charge)		
Emailed Documents	\$0.15 per page (research fee shall also apply)		
Scanned pages	\$0.25 per page (research fee shall also apply)		
Large requests (over 50 pages and/or more than 4 hours of research)	Fully executed agreement to pay for all associated costs		

Estimated cost: _____

Amount Paid: _____ Date: _____

Additional cost: _____

Amount Paid: _____ Date: _____