REQUEST FOR ACCESS TO PUBLIC RECORDS

303 Franklin Street, Porter, IN 46304
Phone: 219-926-2771 • Fax: 219-395-8811
Email: clerktreasurer@townofporter.in.gov

Request for Access to Public Records pursuant to Indiana Access To Public Records Act
(I.C. 5-14-3, et seq., as amended)

REQUESTOR INFORMATION

Name:

Organization (if applicable):

Mailing Address:

Telephone:

Email:

Date of Request:

TYPE OF REQUEST

☐ Inspect Existing Public Records ☐ Receive Copies of Existing Public Records

Preferred Delivery Method:

☐ Email ☐ Paper Copies ☐ U.S. Mail ☐ Electronic Media ☐ No Preference

PREFERRED FORMAT

If responsive records exist in more than one existing format, I prefer:

☐ PDF ☐ Existing Electronic File ☐ Paper Copies ☐ No Preference

EXISTING PUBLIC RECORD(S) REQUESTED

Please identify the existing public records requested with reasonable particularity.

TIME PERIOD

Beginning Date: _____ **Ending Date:** _____

ADDITIONAL REQUEST INFORMATION

Indiana Residency:

☐ Indiana Resident ☐ Not an Indiana Resident ☐ Prefer Not to Answer

Request Submitted On Behalf Of:

☐ Myself ☐ Another Indiana Resident ☐ Another Non-Indiana Resident

☐ Indiana Business ☐ Non-Indiana Business ☐ Other:

Primary Purpose:

☐ Personal Use ☐ Civic / Government Oversight ☐ Journalistic / News Reporting

☐ Academic Research ☐ Nonprofit Activities ☐ Commercial Use

☐ Other: _____ ☐ Prefer Not to Answer

INTENDED USE CERTIFICATION

Town of Porter prohibits the use of certain public records obtained under the Indiana Access to Public Records Act for commercial purposes except as otherwise permitted by law. News reporting, nonprofit activities, and academic research are exempt.

☐ **I certify that I do not intend to use the requested records for a prohibited commercial purpose.**

☐ **I intend to use the requested records for a commercial purpose.**

If commercial, please explain:

_____

ACKNOWLEDGMENT

- My request identifies the records sought with reasonable particularity.
- The Town may request clarification if a request is overbroad, vague, or does not identify the records sought with sufficient particularity to allow the Town to locate and produce responsive records.
- The Town provides access to existing public records as provided by Indiana law.
- The Town is not required to create a new record, compile information into a format that does not already exist, perform research, programming, or manipulate electronic data.
- Responsive records will generally be produced in the format maintained or another reasonably available format.
- Records may be redacted or withheld as authorized by law.
- Applicable fees may apply as permitted by law and the Town of Porter's adopted fee schedule. You will be notified in advance if fees are applicable.
- Submission does not guarantee responsive records exist or are disclosable.

_____ _____

Requestor Signature Date

***NOTICE**: Completion of the sections regarding residency, representation, and purpose is voluntary unless otherwise required by law. Choosing not to provide this information may affect the Town's ability to prioritize requests or assess supplemental fees as permitted by Indiana law.*

THIS PAGE IS FOR OFFICE USE ONLY

Received by: _____ **at** _____ _____
Printed Name Date Time

_____ _____
Signature Department

Method Received: ☐ Email ☐ Mail ☐ In Person ☐ Portal ☐ Other: _____

Receipt of Request acknowledged: _____
Name Date Time Via

Disposition of Request: ☐ Granted ☐ Partially Granted ☐ Denied ☐ Withdrawn ☐ Unable to complete

Applicable Fees: _____

Request was completed and sent to requester on: _____ _____
Date Time

Request was delivered via: ☐ Email ☐ Mail ☐ Picked up in Person ☐ Inspected in Person

Request completed by: _____ _____
Printed Name Signature

Request denied or deemed unable to complete on: _____ _____
Date Time

Reason(s) for denial, partial denial, or incompletion of request:

_____

_____

_____

_____

_____

_____

_____

Applicable Statutory Citation(s):

_____

Request denied or deemed unable to complete by:

_____ _____
Printed Name Signature

Additional notes:

_____

_____

_____

_____

Entered in APRA Request Log on: _____ By: (Initials): _____