



**INLAND EMPIRE UTILITIES AGENCY**  
**PUBLIC RECORDS REQUEST FORM**

REQUESTOR:	DATE:	TIME:
PHONE:	How would you like to receive your records? (Refer to Schedule of Fees)	
E-MAIL:		
ADDRESS:		
REQUESTED BY: <input type="checkbox"/> VISIT <input type="checkbox"/> MAIL <input type="checkbox"/> E-MAIL		
	<input type="checkbox"/> E-mail	<input type="checkbox"/> CD
	<input type="checkbox"/> Mail Photocopies	<input type="checkbox"/> Other:

RECORDS REQUESTED – DESCRIPTION

**RECORDS MANAGEMENT USE ONLY – LEAVE BLANK**

TIME EXPENDED	RECORDS RESPONSE:		
RECEIVED:	MISCELLANEOUS CHARGES		DISPATCHED BY
PULLED:	Photocopy:	Certified:	Date:
RESEARCHED:	Faxed:	Registered:	Mail:
OTHER:	E-mail:	Courier:	Visit/Other:
	Postage:	UPS:	Fax: