



Town Clerk's Office 450 S Parish Ave Johnstown, CO 80534

Phone: 970-587-4664 Fax: 970-587-0141 www.townofjohnstown.com

Public Records Request Form

Date of Request: _____ Time: _____

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Daytime phone: _____ Fax: _____ Email Address: _____

Copies Requested Yes () No ()

Instructions: Please indicate the information desired and / or list each requested document.

Please be as specific as possible:

Pursuant to C.R.S. § 24-72-203 three (3) working days may be allowed for a search of the records. This may be extended by (7) working days for extenuating circumstances, to include the records being in active use, in storage or otherwise readily available.

Records are available for viewing or pickup between the hours of 8:30 a.m. to 4:30 p.m.

Staff Use Only:

Staff Signature:			
Date Received:		Time Received:	
Date Completed:		Time Completed:	
Request Denied:	In Whole ()	In Part ()	Date:
Deposit Required	Yes ()	No ()	Date:
Amount of deposit:			
TOTAL DUE:			