COUNTY OF MONTGOMERY REQUEST FOR ACCESS TO PUBLIC RECORDS

I APPLY TO INSPECT THE FOLLOWING RECORD(S) DEPARTMENT.	
Requested By (please print)	Signature
Mailing Address	Date
APPROVED	
DENIED (reasons checked below)	
Confidential disclosure	
Part of Investigatory Files	
Unwarranted Invasion of Personal Privac	y
Record Which This Agency is Legal Cus	todian Cannot Be Found
Record is Not Maintained by this Agency	,
Exempted by Statute Other Than Freedor	n of Information Act
Other (Specify)	
SIGNATURE	DATE:
TITLE/DEPT. OR AGENCY HEAD	
DEPT. HEAD: Return Form to Records Access Offic	er

NOTICE: You have the right to appeal a denial of receipt of denial.	this application to the County Attorney within 30 days of
I HEREBY APPEAL:	
Signature	Date