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PUBLIC RECORDS REQUEST

Florida Statutes §119.011(12)

“PUBLIC RECORDS” MEANS ALL DOCUMENTS, PAPERS, LETTERS, MAPS, BOOKS, TAPES, PHOTOGRAPHS, FILMS, SOUND RECORDINGS, DATA PROCESSING SOFTWARE, OR OTHER MATERIAL, REGARDLESS OF THE PHYSICAL FORM, CHARACTERISTICS, OR MEANS OF TRANSMISSION, MADE OR RECEIVED PURSUANT TO LAW OR ORDINANCE OR IN CONNECTION WITH THE TRANSACTION OF OFFICIAL BUSINESS BY ANY AGENCY.

Florida Statutes §119.07(1)(a)

EVERY PERSON WHO HAS CUSTODY OF A PUBLIC RECORD SHALL PERMIT THE RECORD TO BE INSPECTED AND COPIED BY ANY PERSON DESIRING TO DO SO, AT ANY REASONABLE TIME, UNDER REASONABLE CONDITIONS, AND UNDER SUPERVISION BY THE CUSTODIAN OF THE PUBLIC RECORDS.

PROCEDURE:

Most County records are promptly available to the public upon request. However, to ensure file content is not compromised, files will not be loaned out and may not be removed from the county department or office. Files are available to be reviewed by appointment.

The procedure for inspecting or obtaining copies of public record(s) is as follows:

1. A request must be submitted to the County identifying the public record(s) sought with reasonable specifications such as issuer, name of document, date, etc.
2. The County will act diligently to locate and produce requested public records. However, allow five (5) work days for a response. If an extraordinary volume of files or records are requested, the County will advise the requestor in writing, within five (5) work days, of the time that is necessary to complete the public records request.

3. If you are requesting file or record review, you will be contacted when the requested files or records are available to be reviewed. An appointment will be scheduled for the review of files.
4. The County will assess reasonable charges to access, search for, duplicate, and supply requested public records, and the County will contact and provide the requestor with a detailed quote outlining such charges. Upon receipt of payment, files or records will be copied, and requestor will be notified when copies are available to be picked up or e-mailed.

The information listed below is requested to expedite your request and document public records request activity.

REVIEW FILE: YES ____ NO _____

REVIEW DATE: _____ **REVIEW TIME PERIOD: FROM:** _____ **TO:** _____

LIST RECORD(S) OR FILE(S) REQUESTED TO BE PULLED FOR REVIEW:

1. _____
2. _____
3. _____
4. _____

COPY ENTIRE FILE: YES _____ NO _____ (If the entire file is not requested please indicate the specific documents that you are requesting copies of. Please provide the date of issuance of the document when possible.)

SUBJECT OR NAME OF FILE(S) OR RECORD(S) TO BE COPIED:

1. _____
2. _____
3. _____

REQUESTOR INFORMATION:

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL: _____

SIGNATURE OF REQUESTOR: _____

DATE OF REQUEST: _____