



**West Basin Municipal Water District
Public Records Request Form**

REQUESTOR NAME:	REQUEST DATE:
ORGANIZATION:	EMAIL:
ADDRESS:	TELEPHONE:

Description of Requested Records

(In accordance with Government Code Section 6253 (b) of the California Public Records Act)

The District has ten (10) days to determine whether it is in the possession of any non-exempt records responsive to this request and to provide an estimated date and time by which the records will be made available.

There could be a charge assessed in accordance with West Basin’s Administrative Code, adopted June 2007. The cost of copies is \$0.50 per page. Blueprint copy is \$3.00 for the first page and \$1.50 for each additional page. An additional fee of \$2.00 is required for certified copy.

Please send completed form via email or mail or fax to:

**West Basin Municipal Water District
17140 South Avalon Boulevard, Suite 210
Carson, CA 90746-1296
Attn: Records Management Coordinator
Tel: 310-217-2411; Fax: 888-821-6442
Email: PublicRecordsRequest@westbasin.org**

WEST BASIN USE ONLY – PLEASE LEAVE BLANK	
Date Request Completed:	Cost:
Notes /Exempt Records:	