

City of Newport

998 Monmouth Street, Newport, KY 41071 859-292-3668 www.newportky.gov

Open Records Request Form

Name:	Phone Number:				
Address:					
Email address	S:				
I wish to	☐ obtain	or	☐ review	copies of the following	public records:
1					-
2					-
3					-
4					-
Request date	d this	day of		, 20	
				Signature of Applicant	
be accepted via email. The documents. It	via regular m nere is a \$.1 may take u	ail, via ha 0 per pa p to three	nd delivery, o ge (Size 8 business da	e made to the City Clerk's or via facsimile. Requests ½" x 11") charge for coays for us to respond to your request.	cannot be accepted opies of most public
Reason for D	enial:			n 8:30 AM until 4:30 PM.	
2. The reques voluminous pu	ted places arublic records	e an unre	asonable bur	den on the custodian in pr	oducing
Docum Copies	of Request nents Review of Provided by	ed Immed			
				Total Cost \$	_ _
Received By	:			Date:	