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**OLDHAM COUNTY ENGINEER**

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[WWW.OLDHAMCOUNTYKY.GOV](http://WWW.OLDHAMCOUNTYKY.GOV)

**Open Record Request Form**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-mail (Optional): \_\_\_\_\_

Telephone: (daytime) \_\_\_\_\_ Cell: \_\_\_\_\_

- Preferred Delivery  Pick Up  
 U.S. Mail (Include self-addressed postage paid envelope)  
 On-site Inspection  
 Fax ( fax # \_\_\_\_\_ )

**Records Requested:**

(To expedite the request, be as specific as possible in describing the records being requested. Also include the type of access requested (copying or inspection) Copies for non-commercial for open record shall be charged at ten cents per page. Commercial request for open records shall be charged at a rate commensurate with the standard set out in KRS 61.870, and based upon all cost associated with the acquisition of the compilation thereof.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(must be signed to be a valid request under the Kentucky Open Records Act)

**\*\* FOR AGENCY USE ONLY \*\***

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Fee Collected: \_\_\_\_\_

Records provided: \_\_\_\_\_

\_\_\_\_\_

Disposition notes: \_\_\_\_\_