

**Franklin County Fiscal Court**

321 West Main Street

Frankfort, Kentucky 40601

502/875-8751

502/875-8755 (fax)

For Office Use Only	
Received by:	_____
Review (Initial)	_____
Cost/Paid	_____
Disposition	_____

**Request for Public Records (Open Records Act)  
KRS 61.870 to 61.884**

Instructions: Complete items I., II., III. and IV.

Franklin County Government will review and respond within the time permitted by law.

**I. Applicant Information**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Date of Request: \_\_\_\_\_

Day Phone: \_\_\_\_\_  
 Evening Phone: \_\_\_\_\_  
 Time: \_\_\_\_\_

**II. Specific Public Record(s) Requested**

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

**III. Method in which I want to receive/review/inspect requested records:**

- I want to inspect records at 321 West Main Street.\*
- I want copies sent via first class mail (payment must be made in advance).\*\*
- I will pick up copies, please call me at \_\_\_\_\_
- Other \_\_\_\_\_ (please specify)

\*I understand that I may make abstracts or have copies made, but may not remove these public records.

\*\*Copies are 10 cents per page. Make check payable to Franklin County, Treasurer.

**IV. Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**V. The above records are available for immediate inspection and may be reviewed at:**

\_\_\_\_\_ on \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ a.m./p.m.  
 (place) (date) (time)

**VI. The above records are not available at this time, but may be inspected at:**

\_\_\_\_\_ on \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ a.m./p.m.  
 (place) (date) (time)

**VII. The delay is due to:**

- Active use of requested records.
- Records are in storage and must be located.
- Records are not otherwise available.
- Other \_\_\_\_\_

**VIII. The request for inspection is denied due to the following reason(s):**

- The records are exempted by law from mandatory disclosure;
- The request places an unreasonable burden on the custodian in producing voluminous copies.
- Other reason(s), specify: \_\_\_\_\_

**IX. ( ) The requested records have been sent, reviewed or inspected.**

**Signature of Custodian** \_\_\_\_\_ **Date** \_\_\_\_\_