

Sundale Mutual Water Company

Freedom of Information Act Request

Date:		
Name:	Phone:	
Mailing Addres	ss:	
I request tha	at a copy of the following documents:	
1)		
2)		
	nelp to determine the status of this request (please check a suitable description of the e of the request below).	requester
	a representative of the news media affiliated with the newspaper (m on station, etc.), and this request is made as part of news gathering and not for a com-	
for a scl	affiliated with an educational or noncommercial scientific institution, and this requestional or scientific purpose and not for a commercial use.	est is made
	an individual seeking information for personal use and not for a commercial use.	
	I am aware of the fees charge for the above requested documents of \$1 per page. Up ndale personnel will estimate the per page cost and payment is due upon the time of	
Sundale Estin	mate Per Page Costs: pages x \$1 per page = \$	(Initial)
remaini	stimate is over, (customer owes more than original estimate) Sundale will require paing balance due. stimate is under, (customer overpaid for the estimated price) Sundale will issue a chalance.	
the mail stating	Il be available no earlier than 20 business days of my request. Customer will receive g that they are available for pick up. They will be available up to 30 days of the date astomer. If the documents requested are not available to the public we will contact y of the request.	of letter
Customer Signa	ature:	
	For Office Use Only	
Employee Sign	nature of Receipt: Date Received:	