



Mapaville Fire Protection District
 3687 Plass Rd.
 Festus, MO 63028
 P: 636-937-6302 F: 636-933-1962



Document Request Form

Date: _____

Type of Document Requested:

____ Fire Incident Report ____ Meeting Minutes ____ Other: Describe below:

Date(s) of Document or Meeting:

Address of Incident (if applicable):

Purpose of the Request:

Requesting Party Information

Name: _____

Phone: _____

Address: _____

I acknowledge that I understand that I have had the opportunity to read the District's policy and procedure regarding Sunshine Requests, and am aware of the fee structure and my obligation to pay for the time to locate and copy, and the copies of the documents requested at the following rates:

A \$0.10 per page fee will be assessed: \$_____

A fee of \$25.21 per hour to research the request, locate and copy documents



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Signature of Requesting Party: _____ **Date:** _____

Received Signature: _____ **Date:** _____

Date Document(s) Provided: _____ **# of Pages:** _____

Custodian of Records Signature: _____ **Date:** _____