



PUBLIC RECORDS REQUEST FORM

City of Gretna, Gretna City Hall
740 Second Street, Gretna, LA 70053-5829
P. O. Box 404, Gretna, LA 70054-0404

All public records requests from the City of Gretna, Louisiana will be in the following manner:

Complete the information requested below.

1. E-mail to: ncruz@gretnala.com (preferred) or Fax: (504) 363-1509; Call prior to faxing (504) 227-7614).
2. When the requested information is retrieved and ready, you will be contacted via an e-mail or by phone.
3. Copying charges will apply, for the first page **\$3.00 minimum** and **\$1.00 each additional page** thereafter.
4. **Archives Search:** Public records are generally maintained for a period of three (3) years. To the extent that a request seeks records beyond 3 years, in certain limited situations records may exist as archived. If an archive search is requested, beyond the 3 years, the cost of a search of the municipality's archives is sixty-five dollars (\$65.00) per hour. Please note that the \$65.00 charge is separate and apart from the general copying charges. **Advance payment must be made for the first hour of search.** The City of Gretna will process public documents requests for archived documents upon receipt of the \$65.00 advance payment. This applies only to records beyond 3 years.

Request Date: _____

Name _____ **Company:** _____

Address _____
No. Street City State Zip Code

Contact Phone(s): _____ **E-Mail Address, please** _____

Specific Description of Records requested: (Please use provided space below.)↓

Signature of requestor

Information Delivery:

- ☐ **View Records.** The requestor will be notified when the records are available for review. There is no cost to view records during regular business hours.
- ☐ **Copies by mail.** A letter stating the cost for copies will be sent to the requestor. Paid prior to delivery.
- ☐ **Pick Up Copies.** A letter stating the cost for copies will be sent to the requestor. Paid prior to delivery.

Requested records inspected by: _____ **Date:** _____
(PLEASE PRINT)

I, _____ acknowledge I was given the opportunity to inspect the records requested above and (if applicable) received all copies of the records for the cost, as shown below. ↩

Page(s) count: _____ **PAID \$** _____

Signature acknowledging inspection & receipt of requested copies.