## City of Southfield, MI --- RECORDS REQUEST FORM

Section 1 of 3 - General Information*(+)		
REQUESTING RECORDS		Date Submitted (mm/dd/yyyy):
Company Name:		
Company Address:		
City:	State (XX):	Zip Code:
Primary Contact (Name, Title):		
Phone:	Email:	
(. 1)		
Section 2 of 3 - Reference Information*(+,1)		
Permit Number:		or Bond Number:
Record Request Fee (\$):	Included:	○YES ○NO ○N/A
Payment Type <sup>(2)</sup> :	Forfeit from Bond Check hat are being requested:	Other (Please Specify):
Section 3 of 3 -Additional Material (+)		
	ATTACHN	VIENTS
	hat have been included as part of this	·
(A) If a designated entity is requesting records on behalf of the permit owner or for their own reference, please include documentation from the permit owner authorizing such action.		
REFERENCES		
<ul> <li>(*): Required fields. If a section heading is marked as required, all subsection fields are required.</li> <li>(+): If a field does not have sufficient space to list requirements, please include an attachment with the necessary information. Attachments should clearly indicate the name of the field for which the information is being provided.</li> <li>(1): Please see the permit application procedures and guidelines for request for records fees.</li> <li>(2): If an entity other than the bond holder is submitting this request form and requesting that a fee be forfeited from an existing bond, documentation must be attached demonstrating that the bond holder has agreed to such action.</li> </ul>		
ENGINEERING DEPARTMENT USE ONLY		
Notes:		