

*Santa Ynez River*

**WATER CONSERVATION DISTRICT**

**PUBLIC RECORDS REQUEST INTAKE FORM**

REQUESTOR: \_\_\_\_\_

ORGANIZATION (if any): \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE/FAX NUMBER: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Date Received in Legal Div. \_\_\_\_\_

Assigned to Legal Div. Attorney: \_\_\_\_\_

DESCRIBE RECORDS REQUESTED OR ATTACH WRITTEN REQUEST:

\_\_\_\_\_  
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\_\_\_\_\_  
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Staff Person Taking Request: \_\_\_\_\_