

OPEN RECORDS REQUEST

Community Development Dept. | 9220 Bonita Beach Road, Ste. 111 | Bonita Springs, FL 34135 | (239) 444-6150 | permitting@cityofbonitaspringscd.org

Name of Requester:		
Address:		
Contact Phone:		
Email Address:	FAX:	
Pursuant to Florida Sunshine Laws I am fo	ormally requesting to inspect these	e specific public records:
Date records are requested to be made av	/ailable:	
I agree to pay any copying and/or adminis by Florida law. Such costs may include retrieval, and other direct administrative co	copying charges per page and	
Name (Print):		
Signature:		