



STATE OF UTAH
 NATURAL RESOURCES
 UTAH WILDLIFE RESOURCES

1594 West North Temple, Suite 2110
 P. O. Box 146301
 Salt Lake City, Utah 84114-6301

GRAMA REQUEST FOR RECORDS

Government Records Access and Management Act

FAX No. 801-538-4745

Please submit your Grama request for records to the **Utah Division of Wildlife Resources** government office at the address or fax number provided on this form. **Note: Administrative service fees are assessed for excessive postage and paper copies and/or staff time to search, retrieve, summarize, compile and/or tailor records for all requests of division information.**

Description of records sought (*records must be described adequately*):

I want the records in the following format: ASCII Text File Excel Spreadsheet
 CD ROM Hard Copy

MAIL FAX EMAIL Email Address: _____

I want to inspect the records.

I want to receive a copy of the records. I understand that I will be responsible for copy costs as well as actual expenses incurred in providing the record. I authorize costs up to \$ _____.

I want to receive a copy of the records and request a waiver of copy costs because:

- Release of the records primarily benefits the public rather than me.
- I am the subject of the record.
- I am the authorized representative of the subject of the record.
- My legal rights are directly affected by the record and I am impecunious.

(Please attach information supporting your request for a waiver of fees.)

If the requested records are not public, please explain why you believe you are entitled to access.

- I am the subject of the record.
- I am the person who provided the information.
- I am authorized to have access by the subject of the record or by the person who submitted the information. (Please attach documentation required by U.C.A. 63-2-202).
- Other. Explain: _____

I am requesting expedited response. Please attach information that shows your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or please attach other information that demonstrates that you are entitled to an expedited response under U.C.A. 63-2-204(3).

My name is: _____

Business / Organization: _____

My address is: _____
(Street) (City) (State) (Zip)

My daytime telephone number is (include area code): () _____ Fax No.): () _____

Signature _____

Date _____

Fee Schedule for GRAMA requests

Opt-in reports	\$50.00 for all, \$25.00 per draw
DOPL Wildlife Violation Reports	No Charge for first report and renewals, \$10.00 per duplicate report
Copy of Licenses	No Charge
Research Data Examples include Prairie Dog Shape files Sheep surveys Big Game Data Correspondence Analysis statistics Court Records Law enforcement records General Data requests	Labor up to first hour no charge , \$25.00 per hour after for administrative fees \$50.00 per hour for Geographic Information systems \$75.00 per hour for Data Processing
Copy Fees	.10 cents per copy self service .25 cents per copy staff service