CITY OF GLASGOW
OPEN RECORDS REQUEST

Today’s Date: _______________ Submittal Method: ____________________________

Name: ____________________________________________________________

Address: __________________________________________________________

E-mail address: __________________________ Phone Number: _________________

Pursuant to Kentucky Open Records Act, I request to inspect the following public records (be specific):


__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Body Cam __ (Body Cam footage will be made available for viewing to a directly involved person or entity ONLY. Must have Photo ID. City Clerk will contact you with details). Body Cam footage copies may only be obtained by an attorney representing a directly involved person or entity upon completion of Affidavit in Support of Limited Release of Body-Worn Camera Recordings Form.

Signed: __________________________________________________________________

(Must be signed to be a valid request under the Kentucky Open Records Act)

Is the information requested to be used for commercial purposes? Yes ___ No ___ If yes, complete Commercial Public Records Inspection Application. Commercial purpose is the direct or indirect use of any part of a public record, in any form, for sale, resale, solicitation, rent or lease of a service or any use by which the user expects a profit either through commission, salary or fee.

(Do Not Write Below – This section is to be completed by the City Clerk)

☐ Request Granted         ☐ Request denied
☐ Request granted in part ☐ Request deferred (lacks specificity)
☐ Records not found

Request Date: ____________ Response Date: ____________ Method of Delivery: ____________________________


_________ Total pages used for request @ 10¢ per page $_________/ _______ CD’s @ $2.00 each $_________

Envelope 50 cents Postage $___________ Total Amount Due before request is released: $___________

Signed: __________________________________________________________________

Signature of Custodian

Return Request To: City Clerk Mona Simmons, City of Glasgow, 126 East Public Square, Glasgow, KY 42141
Email: cityclerk@glasgow-ky.com Office Hours: Monday-Friday 7:30 a.m. – 4:30 p.m.
Cash or Check Only – Request must be paid in full before release of documents/CD’s etc.

(Pursuant to the Kentucky Open Records Acts (KRS §61.870 to §61.884) the City of Glasgow has (3) business days after request is received in which to respond, excluding weekends and holidays). The City is entitled to recover actual costs related to providing copies of records. Those recoverable costs may include costs to copy materials to provision in another format with cost recovery of $.10/page. If a record copy is made in order to redact certain information prior to providing the copy since the City incurred a copy cost in order to provide the record, the requestor will be required to pay for that copy cost prior to receiving final copies. Commercial use request (including Attorney request for Body Camera footage is media charge plus $15 per hour staff time to be billed in quarter hour increments).

Revised: 07/23/2020