

**FAIRFAX COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
REQUEST FOR RECORDS**

Under the provision of the Virginia Freedom of Information Act (VFOIA), government agencies may charge the recipients of information for costs involved in retrieving and reporting the information. Based on our cost analysis, we can provide this service, including time and materials, for thirty-two (32) dollars per hour charged at one-tenth (1/10) hour increments. Should we determine the information is not available, you will be charged at the above rate for the time it takes to make this determination. **If records are likely to exceed \$200, it may require the requester to pay a deposit before proceeding with the request.**

PLEASE PRINT THE FOLLOWING INFORMATION

Name: _____ Phone: (____) _____ - _____

Fax: (____) _____ - _____

Company/Organization: _____

Requestor's Address: _____

Requested Properties (Address and/or Tax Map ID): _____

Information Requested: _____

AGREEMENT: I agree to remit any charges involved for the requested information.

Signature

Date

OFFICIAL USE

| | | | |
|----------------------|--------------|--------------------------------|------------------------------------|
| RECEIVED BY _____ | | DATE _____ | |
| COST \$32.00 X _____ | HRS. = _____ | FEEES FOR COPIES: \$5 PER PLAT | \$.50 FIRST 50 PAGES, \$.25 AFTER |
| | | #PLATS ____ = \$ _____ | #PAGES ____ = \$ _____ |
| TRANSACTION# _____ | | DATE _____ | |
| | | TOTAL \$ _____ | |

This application will be placed in the requested files and will become part of the record.