



**CITY OF NEDERLAND  
OPEN RECORDS/INFORMATION REQUEST FORM  
UNDER THE TEXAS PUBLIC INFORMATION ACT (TPIA)**

All requests must be in writing and directed to the City Clerk, City of Nederland, 1400 Boston Avenue, P.O. Box 967, Nederland, TX 77627, Fax: (409) 723-1550, Email: gferguson@ci.nederland.tx.us. Please print or type:

Name of Person Making Request:			
Address:			
City/State/Zip Code:			
Phone Number:			
Drivers License No.:		Signature:	
Date of Request:			

Detailed Description of Information Sought (please be as specific as possible):


**(Check one) Information Format:** (a) \_\_\_ paper copies  
(b) \_\_\_ electronic format (diskette, CD, DVD)

**(Check one) Transmission/Delivery:** (a) \_\_\_ U.S. Mail (additional charges may apply)  
(b) \_\_\_ Email (if possible)  
(c) \_\_\_ Review at City Hall/Public Works/Police Department  
(d) \_\_\_ Pickup upon Notification  
(e) \_\_\_ Fedex (additional charges will apply)

\*\*\*\*\*  
The information requested will be supplied upon receipt of an interpretation that the information sought is not expressly prohibited by law.  
\*\*\*\*\*

**For completion by City only:**

Date Received by City Clerk: \_\_\_\_\_

Disposition:

(a) \_\_\_\_\_ Provided the following information for viewing: \_\_\_\_\_

\$ \_\_\_\_\_ (fees assessed) \_\_\_\_\_ (date)

(b) \_\_\_\_\_ Provided copies of the following information: \_\_\_\_\_

\$ \_\_\_\_\_ (fees assessed) \_\_\_\_\_ (date)

(c) \_\_\_\_\_ Sent to Attorney on \_\_\_\_\_ (date)

(b) \_\_\_\_\_ AG Opinion requested on: \_\_\_\_\_ (date)

(b) \_\_\_\_\_ AG Opinion \_\_\_\_\_ (number) received on \_\_\_\_\_ (date)

Notes: \_\_\_\_\_

City Clerk Signature: \_\_\_\_\_