



OPEN RECORDS REQUEST

P.O. Box 869
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 Big Spring, Texas 79721-0869
 FAX: 432-267-3121

<u>FOR INTERNAL USE ONLY</u>
Date Received:
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Please fill out the following information to request a record or document from the Colorado River Municipal Water District

Last Name:		First Name:	
Mailing Address:			
City:		State:	Zip:
Phone Number:		Fax Number:	

I request: _____ Inspection Only
 _____ Copies of the following records

Please state in detail your document request below: (Attach additional sheets if necessary)

For a public information request to be valid, it must be submitted **in writing to CRMWD**