



**REQUEST FOR INSPECTION, COPYING, OR CERTIFICATION  
OF PUBLIC RECORDS OF THE  
CENTRAL COAST WATER AUTHORITY**

**255 Industrial Way  
Buellton, CA 93427-9565  
(805) 688-2292  
(805) 686-4700 FAX**

1. Request for:  Inspection of public records.  
 Copying  
 Certification

2. Please identify public record(s) by document number (if available), title and date:

a) Document No. \_\_\_\_\_  
Document Title \_\_\_\_\_  
Date of Document \_\_\_\_\_

b) Document No. \_\_\_\_\_  
Document Title \_\_\_\_\_  
Date of Document \_\_\_\_\_

c) Document No. \_\_\_\_\_  
Document Title \_\_\_\_\_  
Date of Document \_\_\_\_\_

3. Requestor's Name and Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Contact by telephone for charges?

Yes  No

**(Space reserved for Office Use Only)**

4. A deposit of \$ \_\_\_\_\_ is required to cover the direct costs of duplication and/or certification before records which have been approved for public inspection will be distributed to the applicant.

Drawing duplication costs: \_\_\_\_\_ pages at .50¢ per page (**\$10 min.**) \_\_\_\_\_

All other duplication costs: \_\_\_\_\_ pages at .25¢ per page (no min. \$) \_\_\_\_\_

Postage Cost: \_\_\_\_\_

**Total Cost** \_\_\_\_\_

Date Request Received: \_\_\_\_\_

Date Deposit Received: \_\_\_\_\_

Date Request Mailed/Processed \_\_\_\_\_