

City of Albuquerque

Environmental Health Department Air Quality Division

P.O. Box 1293 Albuquerque, New Mexico 87103



REQUEST TO INSPECT PUBLIC RECORDS

TO:		Custodian of Records/Division Manager	
	NAME:	ISREAL L. TAVAREZ, P.E., ENGINEERING DIVISION 1	<u>MANAGER</u>
	DIVISION FAX #:	<u>505-768-1977</u>	
	MAILING ADDRESS:	P.O. BOX 1293 ALBUQUERQUE, NM 87103	
FROM:	NAME:		
	FULL MAILING		
	ADDRESS:		
	AGENCY or COMP.	· • • • • • • • • • • • • • • • • • • •	
	E-mail:		
	ike to review the following does you are requesting to review	ocuments (**NOTE TO REQUESTER** Please provide a detaile w):	d description
1.			
2.			
3.			
4.			
	Signature	of Requestor Date	
NOTE	E TO REQUESTER		

If you want a copy of any non-exempt public record, as provided by the Public Records Act, the Division "may require advance payment of the fees (for copying) before making copies of public records," NMSA 14-2-9.B.3. Consistent with NMSA 14-2-9.B.3 and City of Albuquerque Administrative Instruction No. 1-7, revised 5/7/07, the Division requires payment of \$0.10 per page for black and white copies 8.5" x 14" or less, and \$0.90 per page for color copies before copying.