

NOTE TO REQUESTER

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 MANAGER
	DIVISION FAX #:	<u>505-768-1977</u>
	MAILING ADDRESS:	P.O. BOX 1293 ALBUQUERQUE, NM 87103
FROM:	NAME:	
	FULL MAILING	
	ADDRESS:	
	AGENCY or COMPANY (if applicable):	
	TELEPHONE:	
	e-mail:	
	like to review the followi on of the files you are reques	ng documents (**NOTE TO REQUESTER** Please provide a detailed ting to review):
1.		
2.		
3.		
4.		
	Signature	of Requestor Date

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.