| NAME OF REQUESTOR: |  |
| :--- | :--- |
| AGENCY/COMPANY: |  |
| PHONE NUMBER: | FAX NUMBER: |
| EMAIL ADDRESS: |  |

Description of Requested Documents:

I am Requesting the Following Services:

| $\square$ Inspection | $\square$ Copying | $\square$ Inspection \& Copying |
| :--- | :--- | :--- |
| $\square$ General Information | $\square$ Other | $\square$ Electronic Copies |


Request Received Via: $\square$ Walk-in $\quad$ Mail $\quad$ Email $\quad$ Telephone -Other

Forward to:

- Administration
- Billing/ Service
-Communications
-Conservation \& Water Mgmt $\quad$ Engineering $\quad$ Environmental Services
$\square$ Facilities \& Maintenance $\quad$ Finance $\quad$ - Human Resources/Risk
$\square$ Legal Counsel $\quad$ Operations

Date Request Received by CVWD: $\qquad$ Date to Complete By: $\qquad$
Assigned to: $\qquad$ Department: $\qquad$
List of Documents Provided: $\qquad$

Documents provided by: $\qquad$
Employee Name
Date

| Total Cost of Copies:\$ | Completed on: |
| :--- | :--- |
| Completed By: | Department: |

