



SOUTH DAVIS METRO FIRE

Revised: August 2021

GRAMA Request & Denial Forms

GRAMA Request

To: SOUTH DAVIS METRO FIRE
(Name of government office holding the records and/or name of agency contact person)

Address of Office: 255 S. 100 W. BOUNTIFUL UT 84010

Description of Records Sought (records must be described with reasonable specificity):

- ☐ I would like to inspect (view) the records
- ☐ I would like to receive a copy of the records. I understand that I may be responsible for fees associated with copying charges or research charges as permitted
- ☐ *Utah Code 63G-2-203-(4)* encourages agencies to fulfill a records request without charge. Base on *Utah Code 63G-2-203-(4)*, I am requesting a waiver of copy costs because:

- ☐ Releasing the record primarily benefits the public rather than a person. Please explain:

- ☐ I am the subject of the record
- ☐ I am the authorized representative of the subject of the record
- ☐ My legal rights are directly affected by the record and I am impoverished
(Please attach information supporting your request for a waiver of the fees)

If the requested records are not public, please explain why you believe you are entitled to access:

- ☐ I am the subject of the record
- ☐ I am the person who provided the information
- ☐ I am authorized to have access by the subject of the record or by the person who submitted the information. Documentation required by *Utah Code 63G-2-202* is attached
- ☐ Other; Please explain:

- ☐ I am requesting an expedited response as permitted by *Utah Code 63G-2-204-(3) (b)*.
(Please attach information your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or other information that demonstrates that you are entitled to expedited response)

Requester's Name: _____

E-mail Address: _____

Telephone Number: _____ **Date:** _____

Signature: _____

How would you like to receive the information requested: _____

E-mail, pick up, etc.

*Please submit to grama@sdmetrofire.gov or
return to Headquarters/Station 81 @ 255 S. 100 W. Bountiful*

GRAMA Request Notice of Denial

Date: _____

To: _____

Address: _____

Your request received on _____ for the following records or portion of records has been denied:

These records have been classified as (provide the exact citation here):

Private in accordance with UCA 63G-2-302 _____

Controlled in accordance with UCA 63G-2-304 _____

Protected in accordance with UCA 63G-2-305 _____

These records are exempt from disclosure by the following:

Court order: _____

Statue: _____

You have the right to appeal the denial to the chief administrative officer (UCA 63G-2-205-(2) (C)). A notice of appeal must be submitted within 30 days. Your notice of appeal must include your name, mailing address, telephone number, and explanation of what relief you are seeking. You may also include any supporting information with your notice of appeal. The notice of appeal should be sent to:

Chief Administrative Officer: _____

Address: _____

Name of person denying the request: _____

Title of person denying the request: _____