



## TEXAS PUBLIC INFORMATION ACT INFORMATION REQUEST FORM

### ALL REQUESTS MUST BE IN WRITING AND DIRECTED TO THE CITY SECRETARY

2751 SH 35 Bypass, Rockport, Texas 78382

Phone: 361-729-2213, ext. 225 [//sgoodwin@rockporttx.gov](mailto:sgoodwin@rockporttx.gov)

See the Police Department Form for their request.

For guidance regarding your rights as a requestor and the public information procedures adopted by this governmental body, you may review the governmental body's notice required under section 552.205 of the Government Code. You can find additional Public Information Act resources on the Office of the Attorney General's website at <http://www.texasattorneygeneral.gov/open-government>

### REQUESTOR CONTACT INFORMATION

First Name:

---

Last Name:

---

Company/Organization:

---

Address:

---

City:

---

State:

---

Zip:

---

Phone Number:

---

Email Address:

---

Preferred Manner of Written Communication: ☐ Standard Mail ☐ Email  
(Select One)

## RECORDS

Please describe the public records you wish to receive. To expediate the search for the records, please be as specific as possible. Provide a date range if applicable.

---

---

---

---

---

---

---

Under the Public Information Act, some categories of information do not have to be released. Exceptions to disclosure fall into two general categories:

- 1) mandatory exceptions that make information confidential and require a governmental body to withhold information, and
- 2) discretionary exceptions that allow but do not require a governmental body to withhold information.

In most instances, a governmental body is required to request a decision from the Attorney General in order to withhold information from a requestor. However, a requestor may permit a governmental body to redact information without requesting an Attorney General decision. You are not required to agree to the redaction of any information responsive to your request, but doing so may streamline the handling of your request. If you agree to redactions in this request, then you may request the redacted information in a future information request.

Do you agree to the redaction of information that is subject to mandatory exceptions, provided such redactions are clearly labeled on the information you received? ☐ Yes ☐ No

Do you agree to the redaction of information that is subject to discretionary exceptions, provided such redactions are clearly labeled on the information you receive? ☐ Yes ☐ No

### INFORMATION PREFERENCES:

How would you like to have the information provided? ☐ Copies ☐ Inspection

### ADDITIONAL INFORMATION PREFERENCES:

If available, do you wish to receive an electronic copy of the information? ☐ Yes ☐ No

---

Signature of person making the request

---

Date

In signing this form, I declare that the information included in this request, including my identity, is true and accurate.

**PLEASE NOTE:**

If the information requested is unclear or if a large amount of information is requested, you may be contacted to discuss clarifying or narrowing your request. There may be charges associated with production of the requested information.