



City of Annapolis
DEPARTMENT OF PLANNING AND ZONING

145 Gorman Street, 3rd Floor, Annapolis, Maryland 21401

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SALLY NASH, PhD, AICP
DIRECTOR

Public Information Act (PIA) Records Request Form

All requests for records maintained by the Department of Planning and Zoning pursuant to the Maryland Public Information Act should be submitted on this form. Please type or print.

Individual Name _____ Phone Number _____

Business/Organization Name _____

Mailing Address _____

Email _____

A "person in interest" is a person who is the subject of the record, that person's designee or that person's parent or legal representative if the person has a disability. Under law, certain records that would not otherwise be available may be available to a "person in interest". Are you a "person in interest"? No _____ Yes _____ If yes, please explain below:

Address of the records that you want to inspect or have copied _____

Related Permit/Project # if applicable: _____

Does any part of this request relate to any City-owned building or property? Yes _____ No _____

Have you submitted related requests to any other City Departments? No ___ Yes ___ If yes, please identify them:

Describe in detail what particular information you are interested in:

The City of Annapolis charges a fee of .25 per page for copies of most standard documents. Copying charges may be more for larger size items or other specialty type record (i.e. plan drawings). There may also be a fee of \$30.00/hour for retrieval and review of the records if the retrieval and review take more than 2 hours. In the case of an unusually large expense, prepayment may be required in advance. If the request is for a Zoning Verification letter, a flat fee of \$35.00 must be pre-paid to the City of Annapolis.

_____ I am willing to pay all fees for this request without prior notification.

_____ I am willing to pay fees for this request up to a maximum of \$ _____. If the estimated fees exceed this limit, please contact me prior to completing the request.

_____ I am requesting that fees be waived on the following grounds: _____

Signature _____ Date _____

BELOW FOR CITY USE ONLY

We will make every effort to respond to your request within 72 hours, however, some requests may take up to 30 days to fulfill depending on the time required for retrieval and review.

Received by _____ on _____

Request completed date _____ by _____

Fees charged _____ received on _____