OPEN RECORDS ACT REQUEST

Date: ______________________

Name: ______________________

Address: ______________________

Phone: ______________________

E-mail: ______________________

Requested Records:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Thank you for your request to review county records and your interest in county government. After reviewing your request you will be notified within three business days if the documents requested are subject to release under the open records law and of the estimated cost to search, retrieve, copy and supervise access to the requested documents. (O.C.G.A. § 50-18-71) The fee represents the hourly rate of the lowest paid full-time employee with the necessary skill and training to respond to your request. There is no charge for the first fifteen minutes. The charge for copies is generally $.10 per page unless otherwise provided by law.

If you have any questions contact the
County Clerk (melissa.witcher@lumpkincounty.gov) at 706-482-2566 or the
Deputy County Clerk (helen.wells@lumpkincounty.gov) at 706-482-2565

99 Courthouse Hill, Suite H • Dahonega, Georgia 30533 • Phone: (706) 864-3742 • Fax: (706) 482-2697
www.lumpkincounty.gov