



OKLAHOMA CITY HOUSING AUTHORITY

RECORDS REQUEST

Requester: _____ Requester Organization: _____

Phone Number (During Business Hours): _____ Date: _____

Address: _____

Email Address: _____

Records pertain to: Section 8 Public Housing Contracts/Procurement Employment/HR

Other (please explain) _____

Is this request for someone else's records? No Yes List Name _____

List specific records you are requesting, including names, dates, case numbers, property names and addresses, etc.: _____

Purpose of Request: Commercial News Media OCHA Resident Research/Academia

Other (please explain) _____

Records are requested as: Electronic records by email Paper Copies Certified Copies Video

Signature of Requester: _____

Video Data Request

Video Data Request #1:

Specific Building Location: _____

Incident Date: _____ Start Time: _____ AM/PM End Time: _____ AM/PM

Video Data Request #2:

Specific Building Location: _____

Incident Date: _____ Start Time: _____ AM/PM End Time: _____ AM/PM

To be completed by OCHA Staff

Date: _____ Received By: _____ Legal Request No: _____

Total No. of Pages: _____ @ .25 cents each Total Cost of Pages: _____

Total No. of Discs: _____ @ \$5.00, each Total Cost of Discs: _____

Other Fees: _____ Total Cost: _____

Date Paid: _____ Date Mailed/Delivered: _____

Department Head Approval

Signature: _____ Date: _____