



North East Texas Regional Mobility Authority
909 ESE Loop 323, Suite 520
Tyler, TX 75701

OPEN RECORDS REQUEST FORM

1. APPLICANT INFORMATION – All sections are to be completed by applicant.

APPLICANT NAME: _____

FIRM NAME: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

CITY _____ STATE: _____ ZIP: _____

PHONE NO: _____ FAX NO: _____

2. RECORDS REQUESTED – Please be specific in describing the records being requested. Attach additional pages if needed.

Records format preferred: Electronic (pdf) Printed hard copy
Delivery Method preferred: Hand Pick-up Mail

3. APPLICANT SIGNATURE: _____

Items expressly confidential under law will not be disclosed. Refer to Public Information Handbook at www.oag.state.tx.us for more information. Requested information will normally be provided within 10 business days. For large requests, please allow 30 business days. Copy charges will apply for all Open Records Request information released.

4. FORM SUBMITTAL – Submit completed form to:

Colleen Colby
Communications Mgr/Chief of Staff
909 ESE Loop 323; Suite 520
Tyler, TX 75701
Collen.Colby@netrma.org

For NET RMA use:
ORR Record #: _____
Date Rec'd: _____ Date Completed: _____
No of Files / Pages: _____