



RECORDS SEARCH INFORMATION AND FEE SCHEDULE

The Mesa Fire and Medical Department provides the following services for records search and duplication:

The fee for a records search on commercial purpose requests for each address/location is \$30.00 an hour, with a one-hour minimum. Additional time will be charged in 15-minute increments. The charge for each additional 15-minute increment is \$ 7.50. **A \$30.00 check or money order made payable to the City of Mesa is required in advance for the first hour of the search along with a completed records request form (attached).**

Please complete form fields and print document for signature

A separate check is required for each address and request form.

1. A records search includes Mesa Fire and Medical Department business files, consisting of Mesa Fire and Medical Department inspection records and Mesa Fire and Medical Department hazardous materials incident reports.
2. Viewing of paper files is no longer available as files are scanned into a records management system.
3. Large requests will take longer to process than the normal two weeks. (Monday –Thursday are business days for City of Mesa.)

NOTE: Please submit your request(s) to City of Mesa Fire Prevention at PO Box 1466, Mesa, AZ 85211-1466. (No faxed requests will be processed). Our telephone number is 480-644-2622. These guidelines will help us expedite the handling of your request.

A records search will be conducted and copies of any or all information pertaining to the address on each request form will be mailed or emailed. Be sure to include the specific address for **each** request, as **data is not stored by parcel number**.

Please be advised that our investigation will include records from the date the search is initiated to the previous three years pursuant to ARS 41-151-12 . With the exception of Hazardous Materials Incidents. Investigations for Hazardous Materials Incidents will include records from date the search is initiated to the previous six years .
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PUBLIC RECORDS REPRODUCTION REQUEST FORM
(One requested address per form and include a separate check per form)

Please complete form fields and print document for signature

**Required Fields

This document represents the statement of:

**Company Name: _____

**Company Complete Address: _____
Address City State Zip

**Name of Requestor: _____

**Requestor Telephone Number: _____

submitted to this division on: (date) _____ requesting that the department provide reproduction of certain public record(s) specified below.

(Document may be emailed upon request depending on file size and documentation type. Please indicate how you prefer the research be returned. _____ Mail _____ Email _____)

Record sought must be a valid address.

**Record Physical Address: _____

Building Number(s) Suite Number(s)

Date(s) of records requested: From _____ to _____

Requesting party seeks information concerning:

- Types of hazardous materials on site
Hazardous materials incidents on record
Underground fuel tanks present and or date of removal
Date of last fire inspection by Mesa Fire & Medical Department
Documentation of any Fire Code violations pending

Indicate whether the record(s) is/are to be used for:

- Commercial purpose(s) Non-Commercial purpose(s) (personal use)

I declare that I have read the Information and Instruction Sheet accompanying this form (or A.R.S. § 39-121.03 itself) and understand the contents therein. I further declare under penalty of perjury that the foregoing is correct and true.

Requesting Party's Signature