

CITY OF LEXINGTON, VIRGINIA
RESPONSE TO REQUEST
PURSUANT TO

VIRGINIA FREEDOM OF INFORMATION ACT



REQUESTING PARTY INFORMATION:

Requesting Party Name: _____

Requesting Party Response Address: _____

Email: _____ Telephone: _____ Fax: _____

DESCRIPTION OF RECORDS BEING REQUESTED (§2.2-3704(B))

By initialing, requestor acknowledges that the information is correct _____

Telephone Requestor acknowledged that the information is correct.

-----**OFFICE USE ONLY**-----

Received Date: _____ Response Due Date: _____ Response Date: _____

Type of Request: _____ Written/e-mail _____ Verbal/Telephone _____ Verbal/In Person

Department Receiving Request: _____ Responding Department: _____

RESPONSE(S) TO REQUEST:

The applicable response(s) to your request(s) is (are) indicated:

___ The requested records are not kept in this office, you should direct your request to:
Name: _____ Phone: _____

___ The requested records are enclosed. The City has elected not to charge for filling requests which have an actual cost of less than \$50.00, and this request cost less than \$50.00. Accordingly, there is no charge.

___ The requested records are enclosed. Costs relating to searching, copying and supplying this request to the requester are \$_____. Payment is due within 30 days. Please remit check or money order payable to Treasurer of Lexington, Virginia at 300 East Washington Street, Post Office Box 920, Lexington, VA 24450. Please note on memo line, "FOIA request." § 2.2-3704(F).

___ Lexington has estimated that the cost of searching and copying the requested records will exceed \$200. Lexington estimates that the cost of searching and copying will be \$_____. Payment of \$_____ must be received by Lexington before processing of the request begins. § 2.2-3704(H).

___ Before processing this request, the requesting party must pay amounts owed to Lexington for previous request(s) for records that remain unpaid 30 days or more after billing. Lexington records indicate the requesting party owes the amount of \$_____ for previous request(s). § 2.2-3704(I).

___ The requested records do not exist. Lexington is not required to create or prepare a particular requested record if it does not already exist. § 2.2-3704(D)

___ The requested records will be entirely withheld because state law prohibits their release or the records custodian has exercised discretion to withhold the records in accordance with provisions of the Virginia Freedom of Information Act. The Virginia Code Section(s) that authorize(s) the withholding of the records is/are cited below. § 2.2-3704(B)(1)

___ The requested records will be provided in part and withheld in part because state law prohibits the release of part of the records or the records custodian has exercised discretion to withhold a portion of the records in accordance with provisions of the Virginia Freedom of Information Act. The Virginia Code Section(s) that authorize the withholding of the records is/are cited below (see attached).

___ The requested records may be reviewed in person upon request beginning on or after the date given below at the office of the custodian(s) of the records listed below. Please call for an appointment.

On or after

Custodial Office

Phone number

___ The requested records are for records of another agency and are not maintained or in the possession of Lexington. § 2.2-3704(B) (3)

___ It is not practically possible to provide the requested records or to determine whether they are available within the 5 working day period since receiving the request. Stated below are the conditions that make a response impossible. Lexington shall have an additional 7 working days in which to provide one of the preceding responses. § 2.2-3704(B) (4)

___ The records requested have not been identified "with reasonable specificity". Please use the space provided below to clarify record request. If applicable, please see notation below* regarding the record request. § 2.2-3704(B)

*ADDITIONAL INFORMATION CONCERNING ABOVE RESPONSE(S):