

# Village of Sussex

Email: [wisussex@wi.rr.com](mailto:wisussex@wi.rr.com)

N64W23760 Main Street, Sussex WI 53089

Phone 262-246-5200 Fax 262-246-5222

## Public Records Request Form

In an effort to fill your request in the shortest amount of time, please be as specific as possible in your request. Also, please fill in all information requested. You will be contacted when your request is ready for review or pick up in compliance with Wisconsin State Statute Sec. 19.35(4). If no phone number is provided, response will be left for pick up for a period of 7 days.

### APPLICANT INFORMATION

Name \_\_\_\_\_ Date of Request \_\_\_\_\_

Street \_\_\_\_\_ Apt. Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Records Requested:

Please note: A request for access to a public record may not be refused "because the person making the request is unwilling to be identified or to state the purpose of the request", (19.35(l)(i) WI Stats). You are being asked to provide the information on a voluntary basis and as a means to facilitate your request.  
Thank you.

### For Office Use Only

Municipal department, office or work unit receiving request: \_\_\_\_\_

Date and time request received: \_\_\_\_\_

Date and time action completed: \_\_\_\_\_

Action taken on request: ( ) Approved ( ) Approved in Part ( ) Denied

Reason for denial: \_\_\_\_\_

Amount of fee: \_\_\_\_\_

Name and Title of Custodian/Village Clerk acting on request: \_\_\_\_\_