**Planning Division**

**Public Records Act - Research Request Form**

**Your Contact Information**

Name of Requestor: ______________________________

Company: ______________________________________

Address: ______________________________________

Telephone: __________________ Fax: _____________

Email: _________________________________________

**Planning File Information**

Contact Planning Division directly to schedule a viewing appointment.

Planning Project File #: _________________________

Project Location/Address: _________________________

**File Copies**

- Check appropriate boxes below. Fees apply for print or digital copies per file. Note: Some plans may not be available for copy without written permission from the architect, engineer, or designer.

- Planning Commission, Director Hearing, or Planning Manager Staff Report.
- Planning Commission Resolutions (Conditions of Approval).
- City Council Resolutions/Ordinances: ________________________________
- Planning Commission Minutes (Specify hearing date): ____________________________

- Other:

  __________________________________________________________

  __________________________________________________________

  __________________________________________________________

***** For Office Staff Use Only *****

Fill out ALL information below

<table>
<thead>
<tr>
<th>Viewing Appointment Date:</th>
<th>Time:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of files x $1.25:</td>
<td>Date Received</td>
</tr>
<tr>
<td>Number of Pages:</td>
<td>Received by:</td>
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<tr>
<td>Page Fee ( x $ .25)</td>
<td>Date Completed</td>
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<td>Postage Fee:</td>
<td>Completed by</td>
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<td>Total Charge:</td>
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Oxnard Planning Division
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(805) 385-7858 Phone  (805) 385-7417 FAX
Oxnard.org/planning