



Utah Department of
Health & Human
Services

**UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF LICENSING AND BACKGROUND CHECKS**

PO BOX 144103
SALT LAKE CITY, UT 84114-4103
(801) 273-2994
(800) 662-4157 toll free
(801) 274-0658 Fax

GRAMA REQUEST FOR RECORDS

To:
(Name of person and/or government office holding records)

Description of records sought (records must be described with reasonable specificity)

I would like to:

Inspect the Records Receive Copies Request a Waiver of Copy Costs

I understand that I will be responsible of copy costs. Please attach information supporting your request; see U.C.A. 63G-2-203(4) for a list of situations under which an agency is encouraged to provide copies without charge.

If applicable, check one of the following and attach necessary documentation:

I am the subject of the record

I am the person who provided the information

I am authorized to have access by the subject of the record or by the person who submitted the information

Other (specify)

REQUESTOR INFORMATION

Name Phone Number

Address City State Zip Code

Email Address

I am requesting expedited response. (Please attach information that shows your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or please attach other information that demonstrates that you are entitled to expedite response under U.C.A. 63G-2-204(3).)

Signature Date

*The response to a request may be delayed if it is not directed properly. To find out where to direct a request, consult the agency's rule, or telephone the agency or State Archives. The telephone number for State Archives is (801) 538-3012.