

Time: _____	DST: _____
Director: _____	

REQUEST FOR RESEARCH

NOTICE: THE COST OF THE RESEARCH IS \$7.00.

Today's Date _____

INFORMATION WILL BE AVAILABLE WITHIN THREE WORKING DAYS AFTER REQUEST AND PAYMENT RECEIVED.

REQUESTED BY: _____

PHONE NO.: _____ **FAX NO.:** _____

EMAIL ADDRESS: _____

SUBMITTED VIA:

- In Person By Fax (209) 742-5024 By E-mail (building@mariposacounty.org)

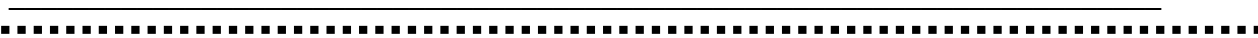
Purpose of Request:

- Copy of Permit Only Copy of Site Plan Only List of Permits on Property with date of Final. Miscellaneous- Be specific _____

**For processing purposes, this office requires the following information:
(This information can be obtained through the Assessor's Office.)**

APN _____ **Address of Property** _____

Please list the names of previous property owners starting with present owner name.



FOR OFFICE USE ONLY

<u>Research Fee (\$7.00 per request)</u>		\$ _____
8 ½ x 11 copy @ \$.30 for first page and \$.20 for all others	_____ @ _____	\$ _____
8 ½ x 14 copy @ \$.30 for first page and \$.20 for all others	_____ @ _____	\$ _____
11 x 17 copy @ \$1.00 for each page	_____ @ _____	\$ _____
CD \$2.00 plus labor*	_____ @ _____	\$ _____
*Labor cost is \$18.78 per hour (one hour minimum)	_____ @ _____	\$ _____

Total Pages Copied / Total Fees Charged # of Pages _____ / \$ _____

