
REQUEST FOR ECIA RECORDS

Date of Request: / /

Name of Petitioner: _____

Address: _____ Phone # _____

E-mail: _____

Records Requested:

Purpose of Request:

Conditions of Approval / Reasons for Denial

ECIA Board _____ Date / / Approved____ Denied____

ECIA G.M. _____ Date / / Approved____ Denied____

By signing below, I hereby agree to the Conditions of Approval set by the ECIA Board and General Manager.

Petitioner _____ Date / /