

**G.R.A.M.A.  
Government Records Access and Management Act**

**Intent:** GRAMA is intended to promote the public’s right of easy and reasonable access to unrestricted public records and to favor public access when, in the application of the law, countervailing interests are of equal weight. (63G-2-102)

**Time:** A request for record access or copies shall be responded to as soon as reasonably possible – no later than 10 business days, or 5 business days if a request benefits the public rather than the requesting individual. (63G-2-204(3)(a))

**Denial:** If access is denied, the agency shall provide a notice of denial, including a description of the record or portion of record to which access is denied, citation to the statute allowing the denial, and a description of the process to appeal the denial. (63G-2-205(2))

**Please complete the GRAMA Record Request Form and return to:**

South Jordan City Recorder  
1600 W. Towne Center Drive  
South Jordan, Utah 84095  
Phone: (801) 254-3742  
Fax: (801) 254-3393

**South Jordan City GRAMA Fee Schedule - Adopted in the Annual City Budget**

|  |         |   |
|--|---------|---|
| Photocopy or print out of regular size record              | \$0.50  | Per page - records smaller than 11" X 17" |
| Black and white photocopy or print out of oversized record | \$7.00  | Per page - records larger than 11" X 17"  |
| Color photocopy or print of oversized record               | \$12.00 | Per page - records larger than 11" X 17"  |
| Electronic records, per DVD                                | \$4.00  | Per DVD                                   |
| Electronic records, per CD                                 | \$2.00  | Per CD                                    |
| Video Records  | \$5.00  | Per Tape                                  |
| Audio Records  | \$2.00  | Per Tape                                  |
| Fax request (long distance within US) per fax number       | \$2.00  |   |
| Fax request (long distance outside US) per fax number      | \$5.00  |   |
| Mail request (address within US) per address               | \$2.00  |   |
| Mail request (address outside US) per address              | \$5.00  |   |
| Research or services fee                                   |         | As provided by Utah Code 63G-2-203        |
| Extended research or services fee                          |         | As provided by Utah Code 63G-2-203        |
| Police Report  | \$5.00  | Per Report                                |
| Traffic Accident Report                                    |         | Per Report                                |
| Other  |         |   |

**CITY OF SOUTH JORDAN**  
**GRAMA Record Request**  
**Fax: 801-254-3393**



*The following form should be completely filled out and returned to the City Recorder's office. The City is allowed 10 business days in which to respond to your request. Presently, South Jordan City Charges .50¢ per page. The City may assess other fees for records compiled in a form other than that maintained. Research or Services Fee may be charged as provided by Utah Code 63G-2-203.*

Requestor's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

In accordance with the **Governmental Records Access Management Act**, I am seeking the following record(s) **specifically described as:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

which I believe are collected, filed and/or used by the City of South Jordan, 1600 W. Towne Center Drive, South Jordan, Utah 84095 (801) 254-3742.

\_\_\_\_\_ I would like to view/inspect the record(s).

\_\_\_\_\_ I would like to receive a copy of the record(s) described above. I understand that the City charges a fee for copies of records and the copies will be provided subject to fees being paid. I authorize cost of up to \$\_\_\_\_\_. If costs are greater than the amount I have specified, I further understand that the office will contact me and will not respond to a request for copies if I have not authorized adequate costs.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

=====

**CITY'S RESPONSE TO RECORD REQUEST – FOR OFFICE USE ONLY**

\_\_\_\_\_ APPROVED – Requestor notified on \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_ DENIED – Written denial sent on \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_ Requestor notified that this office does not maintain record; and, if known, was also notified of name and address of agency that does maintain record on \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_ Extension of time for extraordinary circumstances. Required notice sent \_\_\_\_\_, 20 \_\_\_\_

COPY FEES: \$ \_\_\_\_\_. If waived, approved by: \_\_\_\_\_

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date