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CONTRA COSTA  
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**Public Records Request Form**

SR# \_\_\_\_\_  
(office use only)

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_

I am requesting the following public record(s) from Contra Costa Health Services Hazardous Materials Programs.

**RECORD(S) REQUESTED:** (Use additional form (s) if more space is needed)

**Our records are available electronically. We will send the requested records via email. If PDF files are too large to send via email, we will place the files on a disc or thumbdrive and ask you to choose one of the following methods below.**

Please copy the record(s) and send FedEx to the above mailing address.  
The cost is \$15.00 and is payable by check or credit card (Visa, Discover or M/C).

Please copy the record(s) and notify me when ready for pick up.  
The cost is \$3.00 and is payable by check or cash (**MUST BE EXACT**).

You may email the completed form to [ccchazmat@cchealth.org](mailto:ccchazmat@cchealth.org), or mail or hand deliver to Contra Costa Health Services Hazardous Materials Programs at 4585 Pacheco Blvd., Suite 100, Martinez, CA 94553; or FAX to (925) 646-2073.

**Office Use Only:**

Date Received \_\_\_\_\_ Completed \_\_\_\_\_  No records exist responsive to this request.

Picked Up \_\_\_\_\_ or FedEx \_\_\_\_\_ XR \_\_\_\_\_ Time Spent \_\_\_\_\_

Rev. August 2020

