

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 .25¢ 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: ZACH JOHNSON
Address: [REDACTED] City: SALT LAKE CITY
State: UT Zip: 84111 Daytime Phone: [REDACTED] Fax: _____

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

ALL ENGINEERING DOCUMENTS ON FILE WITH SOUTH JORDAN CITY FOR THE GOLDEN
WEST CREDIT UNION LOCATED AT 3664 W SOUTH JORDAN PARKWAY, WEST OF
BANGERTEER HIGHWAY, NORTH OF SOUTH JORDAN PARKWAY.
PLANS AND/OR REPORTS

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).

X 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 \$ 10. 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]
Signature

10/2/2014
Date

=====

CITY'S RESPONSE TO RECORD REQUEST - FOR OFFICE USE ONLY

APPROVED - Requestor notified on October 9., 20 14

_____ 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: \$ 3.00. If waived, approved by: _____

Transaction Approved**CITY OF SOUTH JORDAN (PER
SOUTH JORDAN, UT
801-254-3742**

Reference Number: 1475
Cardholder: Zachary Johnson
Account Number: XXXXXXXXXX
Card Type: Amex
Approval Code: 161075
Clerk ID: cc
Date/Time: 10/09/14 08:58:27

Sale: \$3.00

Total: \$3.00

Cardmember acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth by the cardmember's agreement with the issuer.



SIGNATURE

Process another transaction

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For Customer Service please call 1.800.834.7790

[Terms of Service](#)

CITY OF SOUTH JORDAN
REVENUE STATEMENT

RECEIVED FROM: Zachary Johnson

DATE: 10/29/14

ACCOUNT #	DESCRIPTION	AMOUNT
	GRAMA COPY	\$3.00
	12 pages, \$0.25 each	
	TOTAL	\$3.00

COMMENTS:

Golden west credit Union

RECEIVED BY: Cornne Cowdell

CHECK # _____

CHECK	<input type="checkbox"/>
CASH	<input type="checkbox"/>
DB. CARD	<input type="checkbox"/>
CR. CARD	<input checked="" type="checkbox"/>