



MOTOR VEHICLE FOR-HIRE AUTHORITY
Gulfport - Biloxi - Ocean Springs

14035-V AIRPORT RD. – SUITE 216
GULFPORT, MS 39503
PHONE 228-222-3274 / FAX 228-222-3275
EMAIL: MVFHA@MVFHA.ORG

REQUEST TO INSPECT, COPY OR REPRODUCE PUBLIC RECORDS

DATE: _____ TIME: _____

PERSON REQUESTING: _____ PHONE: _____

BUSINESS (if applicable): _____

ADDRESS: _____

SUBJECT MATTER: _____

(Any request shall be clear and concise and shall be directed toward only one subject matter)

MATTER OF COMPLIANCE

MANNER OF DELIVERY

_____ Personally Inspect

_____ Personally Copy

_____ Cause to Be Copied

_____ By Mail to Address Above

_____ In person at Designee's Office

I have read and understand the published statements entitled "Policy and Procedures – Mississippi Public Records Act of 1983 and the Motor Vehicle For-Hire Authority Resolution as adopted, and understand that the actual cost of compliance with my request, if granted, shall be borne by me, including mailing costs if applicable. Actual costs of compliance with my request, if granted, shall be paid by me in advance of the receipt of any information.

Signature of Person Requesting Information

REQUEST IS DIRECTED TO: Motor Vehicle For-Hire Authority

ESTIMATE OF COST:	Copies @ \$.50@/\$8.00 per hour	= _____
	Research @ \$17.00/ hour	= _____
	Computer time @ \$55.00 / hour	= _____
	Mailing Cost	= _____
	Total Estimate	= _____

Date Received: _____ Receipt # _____ Amount Paid \$: _____

Request Approved: _____ Request Denied: _____ Date of Compliance: _____

Authority Signature: _____ Date: _____