CEDARBURG FIRE DEPARTMENT

Box 327 • W61 N631 Mequon Avenue • Cedarburg, Wisconsin 53012



PUBLIC RECORDS

RECORDS CUSTODIAN: Jeffrey J. Vahsholtz, Fire Chief

AGENCY: The Cedarburg Fire Department serves as the primary fire and rescue agency for the City and Town of Cedarburg.

LOCATION AND HOURS: The Cedarburg Fire Department is a volunteer fire department with many of the members not available during normal business hours. Please feel free to call (262) 375-7630 and leave a message and someone will get back to you as soon as possible. You may also email our department info@cedarburgfiredept.com or send a request by mail. P.O. Box 327 Cedarburg, WI 53012

<u>COSTS:</u> There shall be no charge for locating and processing a record unless the actual cost exceeds \$50.00, in which case the actual cost shall be determined by the records custodian and billed to the requester.

Requests are forwarded to the Records Custodian/Fire Chief for review as to sufficiency and the request is either approved or denied. At the direction of the Chief, public records requests are processed by the administrative staff during regular business hours, which is Monday – Friday between the hours of 8:00a.m. - 4:00p.m., excluding holidays.

Requests are processed in accordance with WI Statute 19.34 and City of Cedarburg Municipal Code Chapter 3.

Requests for copies of ambulance reports need to be directed to: EMS Medical Billing Associates, LLC

Local: (414) 365-9900; Toll-Free: (866)950-4400 ext. 359; Fax: (414) 365-3889

Please direct any questions pertaining to public records request to the Fire Chief. (See Wisconsin Statute 19.34 and City of Cedarburg Municipal Code Chapter 3 for additional information relating to public records.)

CITY OF CEDARBURG FIRE DEPARTMENT REQUEST FOR ACCESS TO PUBLIC RECORDS

I. TO BE COMPLETED BY PERSON REQUESTING ACCESS TO OR COPY OF RECORDS

DATE OF REQUEST:

Description of the Record(s) to be inspected and/or a copy made:	
<u>-</u>	it reasonably describes the requested record or the informati shout a reasonable limitation as to subject matter or length of
<u> </u>	titute a sufficient request." §19.35(1)(h), Wis. Stats.
Name of Requestor:	Phone No.
Mailing Address of Requestor:	
Purpose of Request:	
Turpose of nequest.	
Please Note: A request may not be refused "bed	rause the nerson making the request is unwilling to be
	cause the person making the request is unwilling to be it." §19.35(1)(i), Wis. Stats. You are being asked to list the
	t." §19.35(1)(i), Wis. Stats. You are being asked to list the
identified or to state the purpose of the request purpose of your request on a voluntary basis. T	rt." §19.35(1)(i), Wis. Stats. You are being asked to list the Thank you.
identified or to state the purpose of the request purpose of your request on a voluntary basis. T	t." §19.35(1)(i), Wis. Stats. You are being asked to list the
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN	or DEPUTY CUSTODIAN OF RECORD
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED:	or DEPUTY CUSTODIAN OF RECORD
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED: ACTION TAKEN ON REQUEST:	tt." §19.35(1)(i), Wis. Stats. You are being asked to list the Fhank you. OR DEPUTY CUSTODIAN OF RECORD
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED: ACTION TAKEN ON REQUEST: () Approved () Approved in	or DEPUTY CUSTODIAN OF RECORD
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED: ACTION TAKEN ON REQUEST: () Approved () Approved in	Thank you. OR DEPUTY CUSTODIAN OF RECORD a part and denied in part () Denied
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED: ACTION TAKEN ON REQUEST: () Approved () Approved in Attach copy of any statement denying acces	t." §19.35(1)(i), Wis. Stats. You are being asked to list the Thank you. OR DEPUTY CUSTODIAN OF RECORD a part and denied in part () Denied ss to, a copy of, or information contained in any public
identified or to state the purpose of the request purpose of your request on a voluntary basis. T I. TO BE COMPLETED BY CUSTODIAN DATE & TIME REQUEST RECEIVED: ACTION TAKEN ON REQUEST: () Approved () Approved in Attach copy of any statement denying acces	Thank you. OR DEPUTY CUSTODIAN OF RECORD a part and denied in part () Denied