

UTAH STATE PRISON INMATE GRAMA RECORDS REQUEST FORM

(A) Inmate Name: _____ Date: _____
Housing Unit: _____ Offender #: _____
Case Manager #: _____ USP #: _____

- (B) 1. In accordance with the Government Records Access and Management Act, I am requesting a copy of the following record (I understand that only one record or series request per form is permitted for privacy and security)
- _____
2. Indicate the Utah Department of Corrections division, facility, or program that created the record requested
- _____
3. Indicate the approximate year, month, and day the information requested was entered into record
- _____
4. Indicate the reason or need for which you are requesting this information
- _____
- _____
5. Indicate, with as much detail as possible, the nature of the information contained in the record you are requesting
- _____
- _____
- _____

(One record or series per form permitted)
(Five approved requests per year)

(C) **LEGAL AUTHORITY TO RECEIVE THE INFORMATION**
(evidence must be provided)

1. I am requesting information which I believe to be Public.
2. I am the subject of the record being requested.
3. I am the person who provided the information.
4. I have a Court Order from a court of competent jurisdiction.

(D)

AFFIDAVIT OF INDIGENCE

[] I am requesting copies of records believed by me to be maintained by the Utah Department of Corrections. I hereby request that any copies of records requested by me be provided without charge. This request is based on GRAMA, UCA § 63G-2-203 (4) (c). I declare that my legal rights are directly implicated by the information in the record requested by me and that I am indigent in accordance with the provisions of FDr15, Indigent Status, as of the date of this records request. (Indigent Status will be verified.)

[] I understand that there may be costs for copying and/or researching the information I am requesting. As I am a current inmate, confined at the Utah State Prison, I understand that unless I have declared indigence, a Money Transfer slip is to be included with this request.

1. I certify that the information provided within this document is true and correct.

(Requester's Signature)

(Case Manager's Signature)

Dated this _____ day of _____, 20 ____

All inmate requests must be signed by his/her Case Manager, who is also a notary.

2. I hereby authorize the Utah Department of Corrections to release the above requested record(s) to the person(s) identified below at the address indicated.

(Name)

(Address)

For requests directing records be released **to persons other than the inmate, the inmate's signature** needs to be **notarized**. In the County of _____, State of Utah, subscribed and sworn to before me, this _____ day of _____, 20 ____.

NOTARY PUBLIC

Residing at: _____

My Commission expires: _____

Notary Stamp

(E)

DIO USE ONLY

Date request received: _____ By: _____

Date request released: _____ By: _____

Date request denied: _____ By: _____

Copying fee(s): \$ _____ . _____ Waived: _____

(reason)

INSTRUCTIONS FOR COMPLETING INMATE REQUESTS:

Obtain form through Case Manager

Complete form (one record or series request permitted per form) Include a Money Transfer slip unless indigent

Send completed form to:

DPO Records

Department

(Revised 12/2018)