



# Mariposa County Environmental Health



**Public Health**  
Prevent. Promote. Protect.

5100 Bullion Street  
Post Office Box 5  
Mariposa, California 95338  
(209) 966-2220 FAX (209) 966-8248

## Inspection of Public Records Request Form

Public Health Department Policy #92-6

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

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

### PROGRAM FILE TO BE REVIEWED:

- |                                 |                     |
|---------------------------------|---------------------|
| _____ Underground Storage Tank  | _____ Air Pollution |
| _____ Business Plan             | _____ Prop 65       |
| _____ Food Facility             | _____ Pools/Spas    |
| _____ Septic System             | _____ Water Well    |
| _____ Request for Investigation | _____ Other         |

### SPECIFIC FILE INFORMATION:

File Name: \_\_\_\_\_ Owner: \_\_\_\_\_

Site Address: \_\_\_\_\_

A.P.N. \_\_\_\_\_ Permit # \_\_\_\_\_

Would you like a copy of this file mailed to you?  Yes  No  
(Payment required prior to receipt of copies, \$.30 for 1<sup>st</sup> page, \$.20 each additional page)

Preferred Appointment Date and Time: \_\_\_\_\_

Alternate Date and Time: \_\_\_\_\_

(Office Use Only)

Public Health Officer Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Appointment Set For: \_\_\_\_\_ Date: \_\_\_\_\_

Contacted Client On: \_\_\_\_\_ Initials: \_\_\_\_\_