

**BOCA RATON AIRPORT AUTHORITY
PUBLIC RECORDS REQUEST FORM**

Name	
Mailing Address	
Phone Number	Fax Number
Company Name	Today's Date

Description of Documentation/Information Requested *(Please be as specific as possible)*:

Please Fax or mail to: Boca Raton Airport Authority, 3700 Airport Road, Suite 304, Boca Raton, FL 33431
Phone: (561) 391-2202, Fax: (561) 391-2238.

As defined in Section 119, Florida Statutes, the Airport Authority reserves the right to charge a fee of \$0.20 per copy for duplication of records. In addition, if the nature or volume of public records to be copied or inspected requires the extensive use of information technology resources or extensive clerical or supervisory assistance, or both, a service charge shall apply.

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NOTES:

Legal Approval: _____

Date: _____

PRR Completed: _____

Date: _____