

**State Water Resources Control Board (Water Boards)**

**Division of Administrative Services (DAS)**

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# California Public Records Act Request

(DAS/ Contracts & Procurement Unit)

**REQUESTORS INFORMATION:**

Name of Individual and/or Company Requesting Records:			Date:
Address:			Phone No:
City:	State:	Zip:	Fax No:
Contact Name:		E-Mail Address:	

Please complete one copy of this form for each Public Records Act Request. Mail or e-mail the form. You will be advised as to whether or not we have records subject to release within 10 calendar days of receipt of the request. There will be a \$0.25 per page charge, and you will be notified of the cost in advance of copies being made. There will be additional charges for copies of information in other forms (i.e., cassette tapes, VHS, etc.). There will be no cost if the requested information can be delivered electronically.

**SPECIFY TYPES OF INFORMATION REQUESTED:**