



Cupertino Sanitary District
20863 Stevens Creek Blvd., Suite 100
Cupertino, CA 95014
(408) 253-7071

Please fax completed form to (408) 253-5173

REQUEST FOR INFORMATION

Name Date/Time

Primary Phone Number FAX E-Mail Address

Type of Request

- Plans Permits Records
 Confidential Communication Accounting of Disclosures Other

Description: _____

APN #: _____ Property Address: _____

Please list Cupertino Sanitary District staff members that were contacted regarding this matter:

Name Date Name Date

PLEASE NOTE:

- All requests will be completed within TEN (10) days from the date of submitted request or extension thereof, if necessary, as provided by Government Code Section 6253.
- Videos and copies are subject to additional fees.
- Documents containing the stamp or seal of a licensed professional cannot be copied without the written approval of said professional.
- There is no guarantee that information requested exists within the Cupertino Sanitary District files.

For Administrative Use Only:

Action taken _____

- Party Notified Date: _____
 Transmitted/Picked Up Date: _____
 Completed by: _____ Date: _____

Notes: