



**CITY OF BELEN**  
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**REQUEST TO INSPECT PUBLIC RECORDS (IPRA)**

**TODAYS DATE:** \_\_\_\_\_

**REQUESTOR INFORMATION (please print)**

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

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

City/State/Zip: \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_

**Please check the appropriate boxes below:**

I am requesting to:  INSPECT or  OBTAIN COPIES.

I would like to receive the requested documents via:  EMAIL or  MAIL

**Please specifically describe the records you would like to be provided:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*All Inspection of Public Records Requests are processed pursuant to the Inspection of Public Records Act, §14.2.1 NMSA 1978. The City of Belen charges a copy fee for all requested documents. You will be notified in writing of the fee for your requested documents. Payment must be received prior to the disclosure of documents. If our city does not maintain these public records, you will be notified in writing where they may be obtained from. This form will be acknowledged by staff within 3 days after it is received at City Hall.*

**Print Name of Requestor:** \_\_\_\_\_

**Signature of Requestor:** \_\_\_\_\_