The Access to Public Records Act, located at IC 5-14-3, guarantees persons and organizations, including the media, access to public records held by public bodies, public officials and public employees. Please note that all records held by the Auditor’s office are not public records. Please refer to IC 5-14-3 for all the rights accorded to you under Indiana law, as well as the prohibitions on disclosure of certain documents to the public or media.

It is the policy of the Hancock County Auditor that all persons are entitled to full and complete information regarding the affairs of County government and the official acts of those elected officials whose actions are maintained in the Auditor’s office. It is the policy of the Hancock County Auditor that the burden of proof for the nondisclosure of a public record on any public agency maintained in the Auditor’s office that would deny access to the record is upon the Auditor’s office and not on the person or organization seeking to inspect and copy the record.

Any person may inspect and copy the public records of this office during regular business hours of 8:00 a.m. to 4:00 p.m., local time. Requests for inspection or copying of a public record must:

1. Identify with reasonable particularity the record being requested
2. Be completed, in writing, on the prescribed form available in the Auditor’s office or accessible from the Hancock County Auditor’s webpage found at [http://www.hancockcoingov.org/auditor/default.asp]

The Auditor’s office will accept your request, free of charge, in person or via facsimile [317.477.1712] and review it for compliance with the above policy. Within seven days, the Auditor’s office will provide the requestor with the office’s decision to approve or deny the records request, with a reasoning provided for a denial for inspection or copying.

If approved, the Auditor’s office will allow the individual or organization requesting the information to inspect the requested public documents or provide the requested copies to the person making the request, or allow the person making the request to make copies on the Auditor’s copying equipment or on the requestor’s own equipment, provided the requestor brings the equipment to the Auditor’s office. The cost for 8½” x 11” or 8½” x 14” copies made by the requestor on the Auditor’s copying equipment is $0.07 per page, and copies made by the Auditor’s office staff at the request of the requestor is $0.25 per page. A schedule of photocopy fees for standard and non-standard paper sizes may be found in Section 34.23 of the Hancock County Code of Ordinances.

Robin D. Lowder
AUDITOR
HANCOCK COUNTY, INDIANA

Revised 11/2009
HANCOCK COUNTY AUDITOR
APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: Robin D. Lowder Hancock County Auditor
Hancock County Government Annex Building
111 South American Legion Place, Suite 217
Greenfield, Indiana 46140-2370
Telephone: 317.477.1105
Facsimile: 317.477.1712
Email: rlowder@hancockcoingov.org

I HEREBY REQUEST TO INSPECT AND/OR COPY THE FOLLOWING PUBLIC RECORDS MAINTAINED BY THE HANCOCK COUNTY AUDITOR’S OFFICE:
(Please make your request as specific as possible. Please attach additional sheets, if necessary.)

Name (Please Print): ______________________ Phone: ________________
Mailing Address: ________________________________________________

Signature____________________ Date: ______________

*************************************************************************************************************
For Auditor’s Office Use Only

___ Approved

Denied for Reason(s) checked below

___ Confidential Disclosure
___ Part of Investigatory Files
___ Unwarranted Invasion of Personal Privacy
___ Record of Which This Office is Legal Custodian Cannot be Found
___ Record is not Maintained by this Office
___ Exempted by Statute Other Than the Access to Public Records Act
___ Other (Specify) ________________________________

Signature____________________ Title____________________ Date: ______________

*************************************************************************************************************

NOTICE TO APPLICANT: You may choose to appeal denial of this application to the County Attorney, who will fully explain his/her reasons for such denial in writing.

I, ____________________________, appeal my denied public records request dated __________:

SIGNATURE: ______________________ Date: ______________________
ADDRESS: ________________________________