



Santa Clara Justice Court

2603 Santa Clara Drive
Santa Clara UT 84765
435-673-6712

jcsantaclara@utcourts.gov

RECORDS REQUEST

Requestor's Name: _____

Address: _____ City, State, Zip _____

Phone No: _____ Date/Time of Request: _____

Email Address: _____

In accordance with the Governmental Records Access Management Act 63-2-201 et Seg. Utah Code, and the Code of Judicial Administration Rule 4-202.08, I would like to (Circle one)

View or **Receive a Copy** of the following records described as:

*Defendants Name and Date of Birth: _____

* Court Case Number (s) _____

Type of Document Requested

- | | |
|--|---|
| <input type="checkbox"/> Citation | <input type="checkbox"/> Discovery Requests and Responses |
| <input type="checkbox"/> Formal Information | <input type="checkbox"/> Plea Agreements |
| <input type="checkbox"/> Judgment and Sentence | <input type="checkbox"/> Motions/Orders (Specify): _____ |
| <input type="checkbox"/> Notices | <input type="checkbox"/> Docket |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Audio Recording on(date) _____ |

I understand the Court can only provide copies of public records. SSN and DL numbers are redacted.

A PHOTO ID IS REQUIRED TO OBTAIN RECORDS.

I understand the court charges a fee for providing copies of court records. Those charges are as follows:

- Certified copy fee \$4.00 per document plus .50 cents per page
- Copy fee .25 cents per page, if being mailed, faxed, or picked up. Email copy is free
- Audio Recording is \$15 per session-emailed copy only

Please indicates how you wish to receive the documents:

- Mailed Emailed Faxed Pick up at the court

Requestor's Signature: _____ Date: _____

Please allow seven (7) business days to fulfill the request.

Billing

Certified Copy _____ documents @ \$4.00 per document = \$ _____

Photocopies _____ pages @ \$.25 per page = \$ _____

Audio Recording _____ sessions @ \$15 a session= \$ _____