

# Pike County Information Request Form

Date information requested: \_\_\_\_\_

Charges: \$25 research fee plus .50 per copy

**OFFICE USE ONLY:** Estimated cost: \$\_\_\_\_\_

In accordance with Mississippi Code Sections 25-61-5 and 25-61-7

Person Requesting Information: \_\_\_\_\_

Company Name and address: \_\_\_\_\_

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

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

Detailed description of information requested \_\_\_\_\_

How would you like to receive this information? \_\_\_\_\_

When do you need this information? \_\_\_\_\_

Pike County shall not be held liable for any errors in the data provided as a result of this request. This includes errors of omission, errors concerning the content of the data and relative positional accuracy of the data. The data cannot be construed to be a legal document. Primary sources from which the data has been compiled must be consulted for verification of the information contained in this data.

The person signing warrants that he or she will abide by the terms of this agreement.

\_\_\_\_\_  
Requestor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Pike County Employee

\_\_\_\_\_  
Date