



**REQUEST FOR WOOD COUNTY  
LAND & WATER CONSERVATION  
DEPARTMENT  
PUBLIC RECORD INFORMATION**

**\*Due to limited staff and current workloads,  
this request will be filled in a reasonable time frame\***

DATE: \_\_\_\_\_

NAME/COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

INFORMATION REQUESTED: (be specific as possible)

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

**\*This request may be subject to fees\***

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**OFFICE USE ONLY**

TAKEN BY: \_\_\_\_\_

FILLED BY: \_\_\_\_\_

DATE FILLED: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

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