

Information Request Form

Records Management

Doc Type: Information Request Form

520 Lafayette Road North St. Paul, MN 55155-4194

Instructions: Use this form to request information from the Minnesota Pollution Control Agency (MPCA) Records Management Unit via email. Please use Internet Explorer for your Web browser. If you have any questions, please contact the MPCA Records Management Intake/Triage staff at recordsmanagementintaketriage.pca@state.mn.us or call 651-757-2728 or 1-844-828-0942. All fields marked with an asterisk(*) are required to be filled in before the form will submit.

- 1. Complete the form and click on the "Submit" button at bottom of form to place the form into email.
- 2. You will receive an email response once your request is assigned and then again when it is complete.
- 3. Please fill out one form for each Information Request.
- 4. New costs for information requests effective March 28, 2016.
- 5. Please submit this form **only** through the MPCA website.

Requester information

	Date (mm/dd/yyyy):		
*Requester name:		*Phone number:	
*Requester email address:			
	(Address, Street, City, State, Zip)		
Site/Facility inform	ation		
*Site/Facility name:		Previous site/ facility name:	
*Site address/location:			
Program(s):			*MPCA Preferred ID:
current costs so found on the MP0 I also agree to p	chedule. (The costs schedule can be for CA Information Requests website at		

Note: If a requester chooses not to give any identifying information, the MPCA will provide him/her with contact information so that he/she will be able to check on the status of his/her request. However, if the agency file manager handling the request has questions about it but is unable to contact the requester for clarification, this may result in a delay in processing the request.