



GLENN COUNTY INFORMATION REQUEST

Name (Print): _____ Date: _____

Business: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Information Delivered Via Email Unless Specified: () Other: _____

Operator ID/Restricted Material Permit Information Request: **No Charge**

Grower Permit Data
Includes: Permit number, Operator, Agent Name Mailing Address, Phone Numbers, Acres and Commodity

All Commodities

Only Commodity: _____

Please include Pesticide Use Report Data

Grower Permit Data
Mailing Address and Phone Numbers Only

All Commodities

Only Commodity: _____

Shapefiles

Miscellaneous Information Request (please be specific)

Staff Review

() Request Approved

() Request Denied:
Requested record is
protected from disclosure
by law.

() Request Denied:
Description inadequate
to identify record.

Date paid: _____
Emailed: _____

Reviewed By: _____
Comments: _____