EXHIBIT 7
CONSENT TO RELEASE COPYRIGHTED DATA

I, _____, certify that I have the authority to authorize the City of Lake City to release the following copyrighted data of which I am the copyright holder: _____
_____
_____

To the following person or people: _____
_____

The person or people receiving the copyrighted data may use it only for the following purpose or purposes: _____

This authorization is dated _____ and expires on _____.
**The expiration cannot exceed one year from the date of the authorization.*

I, the undersigned, agree to give up and waive all claims that I might have against the City, its agents and employees for releasing data pursuant to this request.

_____
Printed Name Title

_____
Complete Address Phone

_____ _____
Notarized Signature Date

STATE OF MINNESOTA)
) ss.
COUNTY OF _____)

On this _____ day of _____, 20_____, before me, a Notary Public within and for said County, personally appeared _____, known to me to be the person described in and who executed the foregoing instrument and acknowledged that they executed the same as their free act and deed.

_____
Notary Public
My Commission Expires On: _____