



REQUEST FOR PUBLIC RECORDS

Name of Requestor: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Location/Department of Record: \_\_\_\_\_

Title and Approximate Date of Record: \_\_\_\_\_

\_\_\_\_\_ Case/Record/Parcel #: \_\_\_\_\_

Please describe the records you are requesting and any additional information that will help us locate them for you as quickly as possible. Failure to provide sufficient information to identify the records may cause delay in processing your request.

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

If I request copies to be made, I understand there is a charge of \$.15 for single-sided copies on 8.5 x 11 or 8.5 x 14 paper. Other sized copies, maps and media are priced at actual cost incurred by the City. The cost for mailing will also be charged to the requestor. For large or costly requests, a deposit may be required in advance.

- I wish to have copies of the records indicated above provided and will pick them up, reproduction fee will apply.
- I wish to have copies of the records indicated above provided and mailed to me, reproduction and postage fee will apply (prepayment may be required).
- I wish to make an appointment to review the records indicated above before copies are made.

I realize that requesting records and not paying for the associated costs may mean that I must pay for them before the next request will be released.

I understand that secondary dissemination of this information is prohibited unless in compliance with RCW 10.97 and RCW 43.56. Additionally, I certify that any lists of individuals obtained through this request for public records will not be used for commercial purposes per RCW 42.56.070(9).

X Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to RCW 42.56, this form acknowledges that your request has been received. The City will respond within five (5) business days, either by providing the information requested, providing a reasonable estimate as to when the records will be available, or by denying the request. Five day response begins one working day after receipt of request. The City does reserve the right to extend this time frame if necessary.

For Office Use Only

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Tracking #: \_\_\_\_\_

Request Received Via:  Phone  Fax  In Person  Letter  E-mail

5 Day Letter Sent: \_\_\_\_\_ Notification Letter Sent: \_\_\_\_\_

Date Request Completed: \_\_\_\_\_ Processed by: \_\_\_\_\_ Time Spent: \_\_\_\_\_

Fee: \_\_\_\_\_ Receipt Number: \_\_\_\_\_