



REQUEST FOR POLICE RECORDS

Name of Requestor: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Location/Department of Record (If Known): _____

Title and Approximate Date of Record: _____

Case/Record/Parcel # (If Known): _____

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: _____

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: _____