



PUBLIC RECORDS REQUEST

(For Court Records, contact Municipal Court; for Police Records, contact Police Department)

Date of Request: _____ Name of Requestor: _____

Company Name if Applicable: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____ Cell: _____

Email Address of Requestor: _____

Type of Record(s) (if known): _____

Date of Record(s) (if known): _____

Location of Record (Department if known): _____

Records Requested (please be as specific as possible and feel free to use additional pages if necessary):
Depending on the complexity of the request, the City will endeavor to fill requests as promptly as possible per RCW 42.56.520.

I understand there is a minimum of 15 cents per page for printed duplication of records, NEW: 10 cents per page for documents scanned into an electronic format; 10 cents per minute of audio or video recordings; 40 cents for every 25 electronic attachments uploaded to an electronic delivery system; 10 cents per gigabyte for transmitting records electronically. I agree to pay the charges associated with my request. Note: The requestor is liable for all charges associated with processing the request even if the requestor later determines that the information is no longer required.

Your request will be processed as promptly as possible. Within five (5) business days of the submittal of this request, the City will either provide the records if available at the time of request, or will try to provide an estimate of the amount of time it will take to process your request.

Method by which I would like to receive the information I have requested:

- Call me and I will pick up in person. Other: _____
 I wish to have documents emailed to me at: _____

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).

Signature _____
Date