

Public Records Request

Submit this completed request to Clatskanie RFPD by mail at PO Box 807, Clatskanie OR 97016, fax at 503-728-4388, or email at bholsey@clatskaniefire.org

Please fill out each field in the form below to request public records from Clatskanie RFPD. You will receive a receipt of submittal by email when your request is received.

Requester Name: _____ **Date of Request:** _____

Organization Name (if applicable): _____

Mailing Address: _____

City *State* *ZIP Code*

Phone: _____ **Email:** _____

Provide a detailed description of the documents you are requesting:

I request that the documents be provided in the following format:

- I wish to arrange an opportunity to personally inspect the requested records.
- I wish to receive a hard (paper) copy of the requested records.
- I would like to have these records provided to me an electronic format.

Signature: _____ **Date:** _____

Your signature indicates that you understand that the Clatskanie RFPD will respond to your request by email as soon as practicable. You understand that there may be costs related to this request based on the fee structure adopted by the Clatskanie RFPD, and you are aware that you will be notified by staff if any fees need to be paid in order to complete your request.

January 2023