

# REQUEST for PUBLIC RECORDS from SKAGIT 911

Date \_\_\_\_\_

Requestor: Please complete the information in the yellow-shaded area.

Legal Full Name of Requestor \_\_\_\_\_ Contact Telephone \_\_\_\_\_

Address \_\_\_\_\_

*Note: If you are looking for a Case # of an incident you were involved in, please contact the agency that responded to the incident (law enforcement, fire, state patrol, etc.)*

Record(s) Requested (case #, names, times, dates – be specific): \_\_\_\_\_

**ACTION REQUESTED:**

[ecrecords@skagit911.us](mailto:ecrecords@skagit911.us)

- Copying
  - Mail the copies to me.
  - Notify me to pick up documents.
- Email
  - Email the copies to me. My email address: \_\_\_\_\_
- Inspection

Requestor's Signature \_\_\_\_\_

**REQUESTOR READ AND SIGN:**

- If my request is for a list of individuals, I certify that it will not be used for commercial purposes and that I will not give or provide access to the material to others for commercial purposes, as prohibited by RCW 42.56.070.

Requestor's Signature \_\_\_\_\_

## DEPARTMENT / AGENCY RESPONSE

- PROCESSING YOUR REQUEST HAS BEEN DELAYED BECAUSE
  - \_\_\_\_ We need additional information. (See REMARKS)
  - \_\_\_\_ We need additional time to process your request. We anticipate being able to provide you with the requested records by \_\_\_\_\_.
  - \_\_\_\_ Other (See REMARKS below)
- FINAL DEPARTMENT / AGENCY RESPONSE
  - \_\_\_\_ The record(s) you requested is/are available.
  - \_\_\_\_ The record(s) you requested is/are available for inspection at \_\_\_\_\_.
  - \_\_\_\_ The record is available with certain information deleted. (See REMARKS)
  - \_\_\_\_ The record(s) you requested do not exist.
  - \_\_\_\_ Your request to inspect or copy the record(s) has been denied, in whole or in part, for the reasons given in the REMARKS section.

Requestor Notified:  in person  by mail  by email  by phone Date: \_\_\_\_\_

Department Head / Elected Official Signature \_\_\_\_\_ Date \_\_\_\_\_

REMARKS: \_\_\_\_\_

Signature & Date of Employee Releasing Information to Requestor: \_\_\_\_\_

Signature & Date of Requestor Receiving Records: \_\_\_\_\_