

REQUEST FOR DISCLOSURE OF PUBLIC RECORDS

Instructions:

Requestor completes Section A and returns to the Public Records Officer at address listed above.
Public Records Officer completes Sections B, C, and D.

This completed form is an open public document and may be released to any requestor.

Section A - Requestor/Records Request Information

Requestor Name:		Phone Number:		Email Address:	
Address:		City:		State:	Zip:
I wish to <input type="checkbox"/> inspect <input type="checkbox"/> receive a copy of the following specific record(s):					Request made: <input type="checkbox"/> in person <input type="checkbox"/> by phone <input type="checkbox"/> by fax <input type="checkbox"/> by mail <input type="checkbox"/> by email Attach request if applicable
If record(s) concern individual(s) other than requestor, please state name(s):			If this request is for a list of individuals, is the list to be used for commercial purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Signature of Requestor				Date of Request	

Section B - For NWESD Use Only

Date	Request Number	Department	Request Received By
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Section C - NWESD Response

<input type="checkbox"/> Allow access <input type="checkbox"/> Do not have the record(s) <input type="checkbox"/> Deny access	Charge is 15 cents for each black and white photocopy. The record(s) requested are legally exempt from public disclosure by the following authority:
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Section D - Requestor Notification

Person contacted:		Date:	Time:
<input type="checkbox"/> by mail <input type="checkbox"/> by phone <input type="checkbox"/> in person <input type="checkbox"/> by email		I made the NWESD's final response as stated. Signature:	