



CITY OF EPHRATA

EPHRATA POLICE DEPARTMENT

121 Alder St SW, Ephrata WA 98823
(509-754-2491) (Fax 509-754-1294) epdcontact@ephrata.org

REQUEST FOR PUBLIC RECORDS
Pursuant to RCW 42.56 Public Records Act

NAME

DATE

ADDRESS

PHONE

I WOULD LIKE TO Inspect (by appointment during regular business hours) or Obtain a copy of the following record(s) [Please describe the requested record(s) in detail, including the case number if known]:

DELIVERY METHOD: WILL PICK UP MAIL (charges may apply) FAX to (____) _____
 EMAIL to _____

Depending on the complexity of the request, EPD will endeavor to fill requests within 5 business days.

- If you did not hand deliver your request and you have not heard from us by the end of five business days, please contact the Records Manager at the address/phone above to verify that EPD received your request.
- THIRD PARTY NOTIFICATION may be used to inform other parties involved that you have requested records (this will delay disclosure by approximately ten business days). WAC 44-14-040(4)
- EPD may determine that the most efficient means to release your documents will be in installments.
- The Public Records Act provides you with the right to appeal should you believe we have improperly withheld or redacted records, or have not fully complied with its provisions. Appeal forms available upon request.

I certify that any records received in response that contain lists of individuals will not be used for commercial purposes, per RCW 42.56.070(9). "Commercial purposes" means contacting or affecting such individuals to facilitate, in any manner, a profit-making activity. Commercial requests will be denied. **Signed:**

Fees:

Inspect/review record(s)	no charge
Paper Copies _____ pgs at .15 each	_____
Electronic Media (actual cost)	_____
Postage (container + actual postage)	_____
Other _____	_____

TOTAL DUE \$ _____

NOTE: Additional fees may apply to emailed and faxed records if reproduction is necessary. The Public Records Act allows EPD to request a deposit and/or to require payment for an installment prior to providing the next installment.

EPD USE ONLY

Date Received at EPD _____
 Copy to Requester _____
 Clerk Assigned: _____
 Date of 5-day ltr _____

Log # _____

Exemptions Log Required Not Required
Notification(s) _____

Date: Inspected _____
 Released _____

Installment 1 _____
 Installment 2 _____
 Installment 3 _____