City of Leavenworth
700 US Highway 2/PO Box 287
Leavenworth, WA 98826
P (509) 548-5275/F (509) 548-6429

REQUEST FOR/ACCESS TO PUBLIC RECORDS

Date ____

Name ____
(Please Print)

Address ____

City ______________________ State ________ Zip ______________

Phone ____
(Home) (Work)

Action Requested:

Inspection ______________ Copy ________ Other ______________________
(Specify – Example: Email address)

Records Requested:
If an emergency request, indicate date desired: ______________________

Title of Record ____

Date of Record ____

Please describe below the records you are requesting and any additional information that will help us locate them for you as quickly as possible.

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Number of Pages ______________ Number of Copies Requested ______________
(Price per page is $.15)

I certify that the lists of individuals obtained through this request for public records will not be used for commercial purposes. Per RCW 42.56 the City of Leavenworth will respond in writing within five business days of the request. Acceptable response includes:

- *Photocopying or providing the opportunity to inspect the records*
- *Acknowledging receipt of the request and providing an estimate of the time needed to produce the records, or*
- *Denial of the request*

Per RCW 42.56.120(2)(b), (c) and (e) the City of Leavenworth charges $.15 per single sided, 8-1/2 x 11 page. Other sized copies may be available at a higher cost, and a postage charge may apply based on the actual cost to the City. Audio copy of recorded meeting is based on the actual cost. For a full list of fees see the Public Records Policy – Resolution 21-2017that is available on the City's website at www.cityofleavenworth.com.

Signature ____

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For Department Use Only

Request received by: ______________________Date:____________ Time:________________.

This request has been given to ___________________________on_______________________.

Five-day response rule begins one working day after receipt. Staff assigned to this request must advise the City Clerk on or before day 5 if documents are unable to be produced within five working days.

Department Action:
Release Requested Record ☐
Referred to Finance Director/City Attorney (may be exempt under code) ☐
Request denied ☐
Request acknowledged, estimated response date:________________☐
Request Entered in Log Sheet ☐

Total Charges ____