

**OLYMPIC VIEW WATER AND SEWER DISTRICT
REQUEST FOR PUBLIC RECORDS**

In accordance with RCW 42.56.520

PLEASE PRINT CLEARLY

Date of Request: _____

Requester Name: _____

Organization: _____

Requester Address: _____

City, State, Zip code: _____

Phone Number: _____ Fax: _____

Email Address: _____

NATURE OF REQUEST:

(Please be as specific as possible with the type of information you are requesting; include address of property, file name or number, owner of property, time period, etc.):

RCW 42.56.070(9) prohibits the disclosure of lists of individuals for commercial purposes. I certify that information obtained through this public records request will not be used for commercial purposes.

- _____ Inspect the records at District Headquarters (no charge)
- _____ Standard Copies (\$.15 per page or \$.10 per page if scanned to electronic form)
- _____ Inspect the records and select records to copy (\$.15 per page or \$.10 per page if scanned to electronic form)

Within five (5) business days of receipt of the request, the Public Records Officer will do one or more of the following: (1) Provide the records available for inspection or copying; (2) Provide an internet address and link on the District's website to the specific records requested; (3) Acknowledge receipt of the request and provide a reasonable estimate of time the District will require to respond to the request; or (4) Deny the request.

