



**TOWN OF COUPEVILLE**  
**PUBLIC RECORDS REQUEST FORM**

Requestor Name: \_\_\_\_\_ Date: \_\_\_\_\_

Agency: \_\_\_\_\_

Requestor Address: \_\_\_\_\_  
Street Suite/Apt

\_\_\_\_\_ Town State Zip Code

Requestor Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Request Made:     In Person     In Writing     Telephone     Fax     Email

Preferred Delivery:     On-Site Inspection     Pick Up     U.S. Mail  
                                   Fax (provide number)     Email (provide address)

**Record Request Information:** To expedite the request, be as specific as possible in describing the records being requested, including dates. Also, please include the type of access requested (copying or inspection) and the medium requested.

I agree to pay the actual cost of duplicating, scanning, and/or mailing copies of the requested public records. I understand that the Town is prohibited from disclosing lists of individuals to requestors for commercial purposes and do hereby swear under penalty of law that I will not use or allow others to use such public records for commercial purposes.

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

\_\_\_\_\_  
Date

**TOWN USE ONLY**

<b>ROUTING</b>	<b>COST</b>	<b>DISPOSITION</b>
PRR No. _____	Est. Duplication	<input type="checkbox"/> Request Granted
Date Received _____	Cost _____	Date Delivered _____
Staff Name _____	Est. Delivery	<input type="checkbox"/> Record Withheld in part
Dept. _____	Cost _____	(explain)
Dept Forwarded To	Personnel	_____
_____	Cost _____	_____
Date _____	Est. Total	<input type="checkbox"/> Req. Denied (attach
Request forwarded to	Cost _____	explanation)
Attorney for review:	Deposit	<input type="checkbox"/> Other:
<input type="checkbox"/> Yes <input type="checkbox"/> No	Amount _____	_____
Date _____	Actual Cost _____	_____
Authorized for Release	Date Paid _____	_____
<input type="checkbox"/> No (explain) <input type="checkbox"/> Yes	Comments:	Scanned
_____	_____	Date _____
_____	_____	Filed request form with
_____	_____	Clerk _____
_____	_____	Date
_____	_____	