



# Request for Public Records

The City Clerk is the Public Records Officer  
109 SW 1<sup>st</sup> St., Suite 221, Battle Ground, WA 98604  
360-342-5008 ▪ 360-342-5050 fax ▪ cityclerk.info@cityofbg.org

FOR OFFICE USE ONLY:

Control No.:

Completed by:

Department:

## CONTACT INFORMATION

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

## DESCRIPTION OF RECORDS REQUESTED

DOCUMENT TITLE: \_\_\_\_\_ DOCUMENT DATE: \_\_\_\_\_

ADDITIONAL DESCRIPTION OR INFORMATION THAT MAY ASSIST STAFF IN LOCATING DOCUMENTS:

How would you like the records to be provided? >

- Inspect records
- Copies of records (copy charges may apply)
- If documents are available electronically, provide to the email address noted above

*I understand that per RCW 42.56, the City of Battle Ground has five business days after receipt of this request to respond. If documents responsive to this request will not be available within five business days, an estimated date of completion will be provided. I understand that I may be charged for copies and payment will be required before the delivery of the documents and in cases of large requests, a deposit may be required. I further understand that my request may contain information that is not disclosable pursuant to state law. If this should be the case, I will be notified in writing.*

*For requests submitted electronically:*

I have read and understand the above statement.  Yes Date: \_\_\_\_\_

**SUBMIT**

*For requests submitted by hard copy:*

**PRINT**

Signature \_\_\_\_\_

Date \_\_\_\_\_

*It is the policy of the City of Battle Ground to keep, and make available for inspection and copying, documents available for disclosure. All requests for public records shall be handled uniformly, fairly and expeditiously.*

## FOR OFFICE USE ONLY – ACTION TAKEN:

1	<input type="checkbox"/> Request Granted	<input type="checkbox"/> Request Acknowledged	<input type="checkbox"/> Request Denied	<input type="checkbox"/> Request Withheld in Part
	Date Available:	Estimated Response 2 – 4	Complete 2 & 5	Complete 2 & 5
2	Request forwarded to City or Prosecuting Attorney for review >		Date: _____	<input type="checkbox"/> CA <input type="checkbox"/> PA
3	Notification of action taken to requestor >	Date: _____		
4	If additional time is needed explain why and timeline >			
5	If denied or withheld in part, name the RCW exemption and how it applies >			
6	Request completed and form forwarded to City Clerk >	Date: _____		