Request for Public Records

Requestor Information

Name: _____ Date of Request: _____

Business Name (if applicable): _____

Email: _____ Phone Number:_____

Address: _____

Description of Records

Please be as specific as possible in the types of documents you're requesting (e.g. reports, emails, letters, etc.). Please provide timeline, clearly spelled names, addresses, and identification numbers. Providing specific information will allow us to process your request more efficiently.

If you are requesting to inspect records at the agency's location, indicate your preferred date/time for an appointment:

Date of Inspection **(*)**: _____ Time of Inspection: _____

* *Please allow a minimum of five [5] business days from the date of request to ensure adequate time for the agency to provide the records requested.*

I understand there may be a cost for production of these records and I may be charged a fee according to PLIA's Fee Schedule. (RCW 42.56.120[2][b] & [c], [3], [4]; RCW 42.56.13)

I certify that any records listing individuals will **NOT** be used for commercial purposes.

_____ _____

Signature Date

Please send requests to:

Email (preferred): pliamail@plia.wa.gov or Attn: Public Records Officer
P.O. Box 40930
Olympia, WA 98504-0930