City of College Place
625 S College Ave
College Place WA 99324
(509) 529-1200

Documents Received By:_____
Payment / Deposit $_____
Receipt No. _____Date_____
CCP Staff ID_____

AMOUNT DUE: $

Request for Public Records or Information

Requests for public records are governed by RCW 42.56. Upon receiving a request for public records, the City will respond within five (5) business days by either providing the record or making an acknowledgement of the request and providing a reasonable estimate of time that will be required to approve or deny the request with specific reasons for the denial. For more information on the City's public records process, or to check the status of your request, please contact the City Clerk at (509) 529-1200 or via e-mail at sscott@ci.college-place.wa.us

Requestor's Name: _____ Date of Request: _____

Representing: _____ Phone Number: _____

Address:

Public Documents Requested: *Please describe **SPECIFIC** records you are requesting and any additional information that will help us locate them as quickly as possible. For example, if known, specific dates, name and "also known as" references, title and subject of record.*

_____

_____

_____

How would you like the records to be provided? (Check all that apply)

_____ I will retrieve documents at City Hall
_____ I would like to review the documents at City Hall

_____ I want a copy of the requested records
_____ I want to inspect the records, but do not want a copy
_____ I want to inspect the records, select records to be copied.
_____ Other: _____

_____ Please mail the documents to me

_____ I understand the fees may be charged in advance.

I hereby certify that the information obtained through this request will not be used for commercial purposes. I understand the charges that have been explained to me on this form and ask that if an amount greater than $_____ is reached; I will be contacted before any more work is done.

Signature: _____ Date: _____

Fee Schedule (subject to change) *Note: Outside services will be billed at actual cost incurred

		Size	*Black & white	*Color:
A.	General copies / scans per single sided page	8 ½" X 11"	$ 0.20	$ 1.00
		11" X 17"	$ 0.20	$ 2.00
B.	Maps / Photographs per item	18" X 24"	$ 3.00	$ 7.00
		24" X 36"	$ 4.00	$ 11.00
		36" X 48"	$ 5.00	$ 15.00
C.	Research / Archive Retrieval (hourly charge plus copy cost)			$ 12.00 per hour
D.	Comprehensive Plan – Paper or CD			$ 25.00
E.	Zoning Codes, CPMC Chapter 16-19 / Paper or CD			$ 15.00
F.	Video or audio media – cost per item; does not include special / unique items			$ 10.00
G.	Special Reports – As determined by City Clerk and/or Administration			$ TBD
H.	Certification of Documents per page			$ 3.00

Updated 1/24/2013

City Staff

Please complete all sections and return this form to the City Clerk no later than the close of the business day in which the request was received. ***Please attach a copy of the information provided.***

Received By: _____ Date: _____ Respond By (date): _____

Requestor Contacted By: _____ Date: _____

Comments:

_____

_____

- o Department Pre-approval Required
- o City Administrator Pre-approval Required

Court Requests

- o Forward to the City Clerk within same day received.
- o Request will be fulfilled by the Municipal Court and released documents or Case No. _____ will be forwarded to the City Clerk.

Court Clerk Signature

_____

All Other Requests

- o Forward to the City Clerk within same day received.
- o Request will be fulfilled by the _____ Department and released documents will be forwarded to the City Clerk.

Authorized Department Representative Signature:

_____

City Clerk Use

Date Received: _____

City Clerk Initials: _____

Date Completed / Closed: _____

- o Forward to Department Head Date: _____
- o Forward to City Administrator Date: _____
- o Request Granted
- o Request Denied

By: _____

Comments:

_____

_____

_____