



CITY OF OAK HARBOR

Public Records Office • 865 S.E. Barrington Drive • Oak Harbor, WA 98277
Contact Info: (360)279-4540 • PublicRecords@oakharbor.org • www.oakharbor.org

REQUEST FOR PUBLIC RECORDS

RCW 42.56

Name of Requester: _____

Mailing Address: _____

Street Address

Apt/Unit #

City

State

ZIP code

Phone: _____ **Email:** _____

Date: _____

Describe the records requested and provide any additional information to help locate the records, such as the address or parcel number, author, recipient, title, and pertinent dates.

If my request is for a list of individuals, I certify under penalty of perjury under the laws of the State of Washington that any list of individuals obtained through this request will not be used for commercial purposes in violation of RCW 42.56.070(8).

Signature and Date

Please identify how you would like to receive the records, subject to the [Public Records fee schedule](#):

Review the records at City Hall

Receive hard copies via *(select one)*:

mail or **pickup**

Receive electronic copies via **email**

Receive electronic copies via *(select one)*:

flash drive **CD** **mail** or **pickup**

FOR EMPLOYEE USE ONLY

	Date	Initials	Notes
Date Received	_____	_____	_____
Request Completed	_____	_____	_____
Cost Information	_____	_____	_____

If exemptions are claimed, complete **Exemption Log**

Staff Involved in Search & Time Spent in Minutes:

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Search Terms & Parameters:

--

Locations Searched:

--

Accounts Searched:

--

Responsive Records* (*indicate whether records are photographed by requester*):

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**Please provide electronic records in relevant department folder: [\\CITY1\Public Records Request](#)

Return this form to the Legal Department for Processing.