



Public Records Request Form

To submit your request for Public Records: 1) fill out this form as completely as possible, 2) submit the completed form by mail: Cowlitz PUD, Public Records Officer, PO Box 3007, Longview, WA, 97632; email: publicrecords@cowlitzpud.org; or in person to our main office located at 961 12th Avenue in Longview.

Please describe the records you are requesting and provide any additional information to help locate the records as quickly as possible. Use appropriate document title and date, if known.

See attached sheet with additional requests

I would like to:

- inspect the records at no charge (I may request copies after inspection).
- receive copies of the records after paying required copying charges. I am willing to pay up to \$ _____ for those copies.

Name

Address

City, State, Zip

E-Mail Address

Sign here

Date

Limitation On Use For Commercial Purposes
Washington State law, RCW 42.56.070(9), prohibits the use of lists of individuals for commercial purposes. "Commercial purposes" means that the person requesting the record intends that the list will be used to communicate with the individuals named in the record for the purpose of facilitating profit-expecting activity. By signing below, you are certifying that that the lists of individuals obtained through this request for public records will not be used for commercial purposes.

For District Use Only

Public Records Provided

Date Request Received _____	Date Completed _____
Bates Number Range (if any) _____	to _____
Number of Pages _____	x \$.15 = + \$ _____
Other Fees _____	+ \$ _____
TOTAL CHARGE \$ _____	

Public Records Not Provided

- Requested Documents Not Found
- Documents or Portions of Documents Exempt (see log below)

Certain portions of the documents requested are exempt from disclosure or contain exempt information that has been redacted. (additional exemption log attached)

EXEMPTED DOCUMENTS

Document type/description	Date	Author/ Recipient	Exemption/basis	# of pg

Event Tracking

Event	Dated	Initials
Date Received:	_____	_____
Request Circulated:	_____	_____
Five-Day Notice Sent:	_____	_____
Date for First Installment:	_____	_____
Date for Completing Request:	_____	_____
First Installment Provided:	_____	_____
Other Installments Provided:	_____	_____
Response Completed:	_____	_____
Request to be Managed by:	_____	
Persons Notified:	_____	