

CITY OF CARNATION 4621 Tolt Avenue/PO BOX 1238, Carnation, WA 98014 TEL:(425) 333-4192 / FAX: (425) 333-4336

REQUEST FOR ACCESS TO PUBLIC RECORDS

The following form is to be filled out at time of request by the person requesting the public records:

Name of Requestor:				Phone:		
Addr	ess:			Date of Request	:	
Requ	est Made:	In person: □	By Mail/Fax: □		By Email: □	
Descr	ription of Public Ro	ecord(s) Requested:				
Publi	c Record Referenc	e Date (if known):				
		FOR O	FFICE USE ONLY			
ACT		ESTS FOR PUBLIC RE			THIN FIVE BUSINESS	
1.	Action Taken: ☐ Request Granted	☐ Acknowledgement; Estimated Response Date Provided (See N	☐ Record Denied Jo. 4) (See Nos. 2	5 and 6)	☐ Record Withheld in Part (See Nos. 5 and 6)	
2.	Request forwar	rded to attorney for review:	Yes: ☐ Date Forward	ded:	No: □	
3.	Notification of Action Taken to Requestor: Date of Notification: a) Request granted □ b) Need for additional time □ How long: c) Request denied □ d) Record withheld in part □					
4.	If additional time needed, explain why:					
5.	If request denied or record withheld in part, name the exemption contained in Chapter 42.56 RCW which authorizes withholding or denial:					
6.	If request denie	f request denied or record withheld in part, explain how the exemption applies to this record:				
7	Request receive	ad bru	Donortononto		Dotor	
7.	Request receive	τα υy	Department:		Date:	

CARNATION PUBLIC RECORDS ACCESS

DECLARATION TO RELEASE PUBLIC RECORDS (**TO BE COMPLETED AND SIGNED WHENEVER THE REQUESTED RECORDS CONTAIN A LIST OF INDIVIDUALS PURSUANT TO RCW 42.56.070(8)**)

	(Please Print Name)
swear, affirm an	d declare as follows:
1. I one or more lists	have requested copies of the public records listed on page A-1, which records include of individuals:
	understand that Washington state law, RCW 42.56.070(8), prohibits the use of lists r commercial purposes.
	understand that "commercial purposes" includes a business activity by any form of ise intended to generate revenue, profit and/or financial benefit.
records for com	Therefore, I hereby, swear, warrant, represent and affirm that I will not use said mercial purposes, and that further acknowledge that it is my affirmative duty to ithin my control and/or influence from using said records for commercial purposes.
	further swear, warrant, represent and affirm that my purpose in requesting the above- ds is exclusively limited to the following [describe]:
I swear u	ander penalty of perjury under the laws of the state of Washington that the foregoing et.
	Signature
	Date and Place of Signing