

**PORT LUDLOW DRAINAGE DISTRICT  
REQUEST FOR PUBLIC RECORDS**

PLEASE PRINT CLEARLY

Date of Request: \_\_\_\_\_  
Requester name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Email: \_\_\_\_\_  
Request made:       In person     U.S. mail     Email

Detailed, specific description of Public Records Requested:  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) of Public Record(s) Requested:  
\_\_\_\_\_  
\_\_\_\_\_

**DECLARATION REGARDING USE OF PUBLIC RECORDS**

I, \_\_\_\_\_, under penalty of perjury under the laws of the State of Washington, hereby declare as follows:

1. I understand that the Public Records Act, chapter 42.56 RCW, prohibits the District from disclosing lists of individuals to requestors for commercial purposes.
2. I understand that the use of lists of individuals for commercial purposes may violate the rights of the individuals named and may subject me to liability for such use.
3. I understand that "commercial purposes" is defined as an intent to use the list of individuals in such a manner as to facilitate commercial activity, regardless of whether the individuals on the list are directly contacted.
4. I am not using the public records requested for commercial purposes and I have not requested such records in order to allow other persons to use the public records for commercial purposes.

Signature of Requester: \_\_\_\_\_

Date: \_\_\_\_\_

City and State of Signing: \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

1. Received by: \_\_\_\_\_ Date received: \_\_\_\_\_

2. Date Requestor notified of action to be taken: \_\_\_\_\_

3. Action taken:      Request granted  
                           Estimated Response date provided  
                           Request clarification  
                           Request denied  
                           Record(s) redacted

4. If additional time needed, explain why:  
\_\_\_\_\_

5. Request forwarded to attorney for review:  
    Yes. Date: \_\_\_\_\_    No.

6. If a request is denied in whole or in part, identify the exemption which authorizes withholding or redaction and a brief explanation of how it applies to this record:  
\_\_\_\_\_

7. Additional Notes:  
\_\_\_\_\_

8. FEES.     [Fee Schedule](#)

Standard copy charge @ 15 cents per page

Charge \_\_\_\_\_ pages @ 15 cents per page:     \_\_\_\_\_

Other:                                                             \$ \_\_\_\_\_

Total charges:                                                 \$ \_\_\_\_\_

Documents provided: DATE: \_\_\_\_\_

                                                                  MAILED: \_\_\_\_\_

                                                                  PICK UP: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Date:       \_\_\_\_\_