

## **RECORDS REQUEST**

## Umatilla Rural Fire Protection District

921 6<sup>th</sup> Street · PO Box 456 · Umatilla, OR 97882 (541) 922 - 3718 · Fax (541) 922 - 3914

Notice: This form is provided per ORS 192.440-7. Records requests are processed in the order they are received. If the request is denied a reason for the denial will be provided in accordance with Oregon Records Law. Payment must be received prior to dispersal of requested records.

Requestor Name:				
Requestor Phone #:				
Requestor Email:				
Requestor Mailing Address:				
DESCRIPTION OF RECORDS: Case / Incident #:	Date / Locatio	on of Incident: _		
Name of Involved Party:				
Additional Information:				
Fees (Permitted by ORS 192.440-4	1)			
Printing of Full Color Full Case Report Cop Incident Only Copy	Photos \$5.00 p by \$8.00 f \$4.00 f	irst page + 0.50 irst page + 0.50	each additiona	al page
Research Fee	\$25.00	per hour (15 m	inute incremer	ıts)
Cost of Request:				
Signature of Requestor:		Date:		
Employee Signature:				
Records Dispersed: In				