

City of Toledo
PO Box 236
Toledo, WA 98591
360.864.4564
cityoftoledo@toledotel.com

PUBLIC RECORDS REQUEST
Attn: Public Records Officer

Toledo Police Department
PO Box 517
Toledo, WA 98591
360.864.6041
toledopd@toledotel.com

If you have a question that you are seeking an answer to and are not seeking a specific document, please do not use this form and instead pose your question(s) to the appropriate City Personnel.

Date Received: _____ Received By: _____

Requestor Name: _____ Organization/Business (if applicable): _____

Address (mailing): _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Record(s) Requested: (Please include document title, name(s) and/or date(s), as best known) _____

Police Case Report: Case#: (if known) _____ Type of Incident: (if unknown, provide date/time/location/details) _____

NOTE: Please expect up to a maximum of 5 (five) working days for your request to be processed. If your request is unclear, you may be asked to clarify what records you are seeking. If you fail to clarify your request or abandon your request, the CITY OF TOLEDO and/or TOLEDO POLICE DEPARTMENT may close your request for records per **RCW 42.56.520** and **RCW 42.56.040**.

Upon locating document(s) I request:

- Inspect the record(s) at no charge (appointment required) Date & Time: _____
- Inspect record(s) and then copy selected page(s) (appointment required) Date & Time: _____
- Standard photocopy(s) - Fee .15¢ per page Pick Up Mailed: + mailing & postage costs apply
- Standard photocopy(s) of electronic record(s) - Fee .15¢ per page Pick Up Mailed: + mailing & postage costs apply
- Electronic copy(s) of scanned record(s) - Fee .10¢ per scanned page Email disk/USB (provided by you)
- Electronic copy(s) of electronic record(s) - Fee .05¢ per each 4 files/attachments or .10¢ per gigabyte Email disk/USB (provided by you)

I certify that the lists of individuals obtained through this request for public records will not be used for commercial purposes or to give or provide access to material to others for commercial purposes.

Signature: _____

Title (if applicable): _____