



## **Public Records Request Form**

The Port of Woodland is committed to provide all citizens access to Port information per Public Records Act RCW 42.56. Public records requests must be completed to provide the public records officer all the information and detail pertaining to specific records. Requesters cannot remove documents from the viewing area or disassemble or alter any document. The requestor will indicate which documents they wish the Port to copy. There is no fee for inspecting public records. The Port will respond to a request within 10 (ten) business days by either 1) providing the record requested ; 2) acknowledging the Port has received the request or 3) deny the request. Additional time may be required for substantial records requests and will communicate the expected time required and issues regarding the required time needed in written form within the ten business days.

Please review additional requirements, fees and information pertaining to records requests at [www.portofwoodland.com](http://www.portofwoodland.com).

**To be completed by Port of Woodland Public Records staff**

Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Time: \_\_\_\_\_

Request received:  In person     by fax     by mail     by email

**To be completed by requester**

Requester's Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

*Action Requested:*

For inspection only (available at the Port office at 115 Davidson Avenue, Woodland, WA)

Copy(ies) to be delivered (Please check one)

By mail                       Pickup in person                       By fax: \_\_\_\_\_  
 By email: \_\_\_\_\_

*Please note: copying, postage and CD fees, if applicable pursuant to RCW 42.56.120. Faxes are limited to (2) pages or will be either emailed or mailed. For larger files, a CD will be used due to data transfer limitations and cost efficiency.*

I certify that any list(s) of individuals obtained through this request for public records will not be used for commercial purposes, pursuant to RCW 42.56.070(9).

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

Submit the form via a scanned complete form via email to [recordsrequest@portofwoodland.com](mailto:recordsrequest@portofwoodland.com), by mail to Port of Woodland, PO Box 87, 115 Davidson Avenue, Woodland, WA 98674 or in person to the Port office at 115 Davidson Avenue, Woodland, WA.

**To be completed by Port of Woodland Staff**

Records request received: _____	By Port Staff: _____
Reviewed: _____	By Port Staff: _____
Comments: _____	
_____	
Clarification Needed:    No    Yes	Requested: _____    Received: _____
Delay Expected:            No    Yes	Date Available: _____
Reason: _____	
Deposit Required:        No    Yes	Amount: _____
Deposit Received:        No    Yes	Amount Received: _____
Records Exempted/Redacted:    No    Some    All	
Standard Copies (\$0.15 per page): _____    Special Copies: _____    Postage/Fax/CD Cost: _____	
Total Cost: _____ (less deposit)	Received: _____
Completed: _____	By Port Staff: _____