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Prevent State Stat	<b>NTY FIRE DISTRICT #5</b> ic Highway • Phoenix, OR 97535 35-4222 • Fax (541) 535-4226
Name:	Daytime Phone #:
Address (City/State/Zip Code):	-
Email address: Preferred method of contact: Phone Email US Mail	
Request is for: Inspection of Public Record (Reviewed at District Headquarters) Copies of Public Record(s)         Information Requested:       Please be specific and provide as much detail as possible to allow District staff to determine the requested recordsquature, content source, including dates and key words:         *Please note that If requesting EMS Medical Records we must have the Authorization to Release Medical Records completed by the Patient or Individual in question.	
How would you like to receive these records? Pick up at District Headquarters Emailed US Mail (cost of postage will be added)	
REQUESTOR TO READ AND SIGN UPON SUBMITTING REQUEST	
I understand that every person has a right to inspect any public record of a public body in this state, except as otherwise expressly provided by ORS 192.501 to 192.505. Further, I understand that fees may be charged to reimburse the District for its actual costs in making the records available. Such calculation may include staff time, costs for summarizing, compiling, or tailoring a record to meet my request. Copies of large documents are sometimes taken to a commercial copy business. For those documents, the fee will be actual cost plus staff time. I hereby request that the District Records Clerk produce, as best to the Clerks ability, the records specified above. Any fees must be paid prior to release of the record(s) requested. A deposit for fees, based on the estimated cost, will be required for any estimate above \$25.00. For estimates above \$25.00, the District will provide a written estimate of the cost, and will seek confirmation to proceed or cancel the request. I understand that if the fee is not paid or additional requested information is not provided within 60 days, the request will be closed.	
Signature	Date Submitted
FOR OFFICE USE ONLY	
Info compiled by: [ Amount due: [	Estimated completion date:// Date completed: Date notified: Date picked up/mailed://



## Procedure for Public Records Request

1. Complete and return the Records Request form with as much detailed information as you can.

2. The District will provide a written cost estimate and MUST receive confirmation that you want the District to proceed with your request.

3. The District will contact you with the estimate and a time the records will be available for inspection.

4. If you request to inspect records at District Headquarters, you will be informed of the next available time for such inspection. A place for ONE person to review the files will be provided. One file at a time will be made available. When you are through with the file, return it to receive the next file. Any pages to be copied should be marked with sticky notes provided by District.

5. When you complete your inspection, return the last file. If staff is available, requested pages will be copied at that time. If staff is not available, you will be informed via your performed method of contact once staff has copied the requested pages.

6. If more than one person wants to review your requested records at the same time, reservations must be made in advance for a conference room. A research fee will be charged to cover staff stime to remain in the room with the files.

## RECORDS OFFICER ACKNOWLEDGMENT OF REQUEST:

[] The District is the custodian of the requested records.

[] The District is NOT the custodian of the requested records. This completes the request and no further action is required.

[] The District is unsure whether it is the custodian of the requested records. We will search for the record and make an appropriate response as soon as practicable.

[] We request the following additional information to clarify and/or expedite the request: \_

[] Copies of the requested record(s) are attached, or are available on the Districtøs website: www.jcfd5.com.