City of Burien | Public Records Request

Requestor Information

First Name | **Last Name**

Email Address | **Phone**

Mailing/Street Address | **Apt No.**

City | **State** | **Zip**

Describe the records you are requesting. **A complete and detailed description of the records you are requesting is necessary to accurately respond to your request.** Your failure to describe the records that you are requesting in sufficient detail may result in the City asking you to clarify your request, thereby delaying your receipt of disclosable records.

Note: there will be a $0.15 per page charge for physical copies of records. There may be additional charges for larger documents. By signing this document, the requestor agrees to pay any costs that may apply.

Please check the appropriate box:

☐ I would like physical copies of the records and will pick them up when they are available.

☐ I would like copies of the records sent to me by e-mail to the address listed above.

☐ I would like copies sent to me by mail sent to the address listed above.

☐ I would like to inspect the records.

The receipt of your copy of this form constitutes the city's internal response to your request for records. The city estimates that it will take approximately six to eight weeks to respond to your request unless it becomes necessary for you to clarify your request. The estimated time required to respond to your request may be based upon the need to locate and assemble the records, to notify third persons or agencies affected by the request, to determine whether any of the information is exempt from disclosure, to redact documents containing material that is exempt from disclosure, or to obtain clarification of the request. If the city is unable to determine which records you are requesting, the city will, in writing, ask that you clarify your request. Please be advised that your failure to respond to the city's request that you clarify which documents you are seeking shall relieve the city of its duty to respond to your request.

Signature of Requestor | **Date Signed**

For office-use only

Received by: | Date/time received:

☐ I provided a copy of this form to the requestor

If needed, you may use the space below for additional details regarding your request.