



Marysville Police Department Request for Records



Please Print Legibly

Name of Requestor: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email Address: _____

Case #: _____ Date of Incident: _____

Type of Incident: _____

If you have limited information, please provide names and birthdates of party's involved, incident location, and any additional information to help us locate the records in a timely manner. Failure to provide sufficient information to identify the records may cause delay in processing your request.

I understand there is a charge of \$.15 for single-sided copies on 8.5 x 11 or 8.5 x 14 paper. Any media included with the records are priced at actual cost incurred by the City. The cost for mailing will also be charged to the requestor. For large or costly requests, a deposit may be required in advance. Records that are not claimed within 30 days will be considered abandoned and the Public Disclosure Request will be Administratively Closed.

- I wish to receive records by Email.
- I wish to Pick Up the records (reproduction fee may apply).
- I wish to have records Mailed to me, reproduction and postage fee will apply (prepayment may be required).
- I wish to make an Appointment to review the requested records.

I understand that secondary dissemination of this information is prohibited unless in compliance with RCW 10.97 and RCW 42.56. Additionally, I certify that any lists of individuals obtained through this request for public records will not be used for commercial purposes per RCW 42.56.070(8).

X Signature: _____ Date: _____

The City will respond to your request within five (5) business days of receipt, either by providing the information requested, providing a reasonable estimate of time that will be required to respond to the request, or by denying the request. Five day response begins one working day after receipt of request. The City reserves the right to extend the estimation of time that will be required to respond to the request if necessary.

For Office Use Only

Received by: _____ Date: _____ Tracking #: _____