

INSTRUCTIONS:

BLAINE-BIRCH BAY PARK AND RECREATION DISTRICT 2

7511 Gemini Street ● Birch Bay, WA 98230 ● email: info@bbbprd2.com phone: 360.656.6416 fax: 360.656.6851

SECTION A: FOR DISTRICT USE ONLY

REQUEST FOR DISCLOSURE OF PUBLIC RECORDS

Date

Requestor completes Section B and returns to the Public Records Officer at address listed above. Request Number Public Records Officer completes Section A and routes to Department appropriate department. Request Received By: Public Records Officer or designee completes Section C and D. This completed form is an open public document and may be released to any requestor. Section B – Requestor/Records Request Information Requestor Name: Phone Number: Email Address: Address: City: State: Zip: Request made: I wish to \square inspect \square receive a copy of the following specific record(s): ☐By Phone ☐ By Fax ☐ By Mail ☐ By Email Attach request if applicable If record(s) concern individual(s) other than requestor, please state name(s): If this request is for a list of individuals, is the list to be used for commercial purposes? ☐ Yes Section C – Blaine-Birch Bay Park and Recreation's Response ALLOW ACCESS Charge is \$.15 for each black and white photocopy. \square WE DO NOT HAVE THE RECORD(S) DENY ACCESS The records you have requested are legally exempt from public disclosure by the following authority: Section D – Requestor Notification Person Contacted: Date: Time: ☐ By mail □ by phone I made the District's final response as stated: Signature: ☐ In person □ by email