



Whatcom County

Public Records Officer • 311 Grand Avenue, Suite 108 • Bellingham, WA 98225
Phone (360) 676-7694 • Fax (360) 715-7466 • web site: www.co.whatcom.wa.us

REQUEST FOR DISCLOSURE OF PUBLIC RECORDS

INSTRUCTIONS:

Requestor completes Section B and returns to the Public Records Officer at address listed above.

Public Records Officer completes Section A and routes to appropriate department.

Public Records Officer or designee completes Section C and D.

SECTION A: FOR COUNTY USE ONLY	
Date	
Request Number	
Department	
Request Received By:	

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:
I wish to <input type="checkbox"/> inspect <input type="checkbox"/> receive a copy of the following specific record(s):				Request made:	
				<input type="checkbox"/> in person <input type="checkbox"/> by phone <input type="checkbox"/> by fax <input type="checkbox"/> by mail <input type="checkbox"/> 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?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Signature of Requestor			Date of Request		

Section C - Whatcom County Response

<input type="checkbox"/> ALLOW ACCESS	Charge is \$.15 for each black and white photocopy.
<input type="checkbox"/> WE DO NOT HAVE THE RECORD(S)	
<input type="checkbox"/> 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:
<input type="checkbox"/> by mail	<input type="checkbox"/> by phone	I made the County's final response as stated.	
<input type="checkbox"/> in person	<input type="checkbox"/> by email	Signature:	