Resolution 2022-002, Exhibit B

CHELAN COUNTY FIRE DISTRICT 1 PUBLIC RECORD REQUEST FORM

INSTRUCTIONS TO requestor:

Complete this form in its entirety. Requests may be submitted to the district via email, mail, delivered in person, or made verbally. Verbal requests may require more time to process because the Public Records Officer will create a written request and verify with the requestor that the written form properly memorializes the request. Send requests to:

Public Records Officer, Chelan County Fire District 1
Mail: P.O. Box 2106, Wenatchee, WA 98807-2106
In Person: 731 N. Wenatchee Avenue, Wenatchee

Phone: 509-662-4734 Fax: 509-662-3967 Email: cblaufuss@chelancountyfire.com

In accordance with state law, the fire district will respond within five business days of receiving your public record request, by either:

- 1. providing the requested records;
- 2. acknowledging the fire district has received the request and providing a reasonable estimate of the time the fire district will require to respond to the request;
- 3. denying the public record request; or
- 4. requesting clarification of the request.

Please describe the records you are requesting in detail and any additional information that will assist in locating the requested information as quickly as possible. Failure to provide sufficient information to identify the requested records may result in denial of the request (WAC 44-14-04002(3)).

Requestor Name:	
Request Date: Time Submitted:	
Time Submitted:	
Phone Number:	
Email Address:	
Mailing Address:	

Note: Communications between the Fire District and requestor will be primarily by email if an email address is provided with the exception of the delivery of the requested records.

Please reference the charges and fees set forth in the fire district's Public Records Policy and Procedures. Specify your preference for record delivery (check all that apply):

I wish to:

- Inspect these records in person
- Inspect these records and then select records for copying or scanning
- Receive paper copies of these records
- · Receive an electronic copy of these records on digital storage media
- Have paper copies mailed to me
- Have copies faxed to me
- Have copies emailed or transmitted electronically to me

Please also indicate the following:

- The information requested is for commercial purposes (RCW 42.17.270)
- I am a claimant against the Fire District (RCW 42.56.080)

Fire District use Only					
Request Received by:	Date:	Time:			
Request Assigned to:	Date:	Time:			
PRA#	Incident or Parcel Number:	Incident or Parcel Number:			
Contact with Requestor via: (within five business days)	Date:	Time:			
Comments:					
Denied, Reason:	Abandoned, Reason:	Fee Charged, \$Paid, Date:			
Complete, Date:	Signature:				