

Public Records Request Form

First Name (required)*: _____

Last Name (required)*: _____

Name of Organization, or Business requesting records (If applicable):

Street address: _____

State: _____ Postal | ZIP code: _____ Country: _____

Email (required)*: _____

Phone (required)*: _____

Description of records you seek (please be specific) (required)*

Choose a delivery option (required)*

- ☐ Onsite Records Inspection
☐ Electronic Copies
☐ Hard Copy*

** I understand that if I do not retrieve such records in person, I will be charged for postage required for delivery on top of general processing fees.*

Fees must be limited to no more than \$25.00 unless the requestor is provided with a written notification of the estimated amount of the fee and the requestor confirms that he/she wants the public body to proceed.

In order to recover its costs for responding to public records requests, the following fee schedule is adopted by the District:

- **Copies of Public Records; Certified Copies:** Copies of public records shall be \$1.00 per copy for standard, letter size copies. Copies shall be certified for an additional charge of \$10.00.
- **Copies of Maps and Other Nonstandard Documents:** Charges for copying maps or other nonstandard size documents shall be charged in accordance with the actual costs incurred by the District.
- **Research Fees:** If a request for records requires District personnel to spend more than 15 minutes searching or reviewing records prior to their review or release for copying, the minimum fee shall be \$50.00 hour and additional charges shall be in ¼ hour increments. The District shall estimate the total amount of time required to respond to the records request, and the person making the request shall make payment for the estimated cost of the search and copying of the records in advance. If the actual time and costs are less than estimated, the excess money shall be refunded to the person requesting the records. If the actual costs and time are in excess of the estimated time, the difference shall be paid by the person requesting the records at the time the records are produced.
- **Additional Charges:** If a request is of such magnitude and nature that compliance would disrupt the District's normal operation, the District may impose such additional charges as are necessary to reimburse the District for its actual costs of producing the records.
- **Reduced Fee or Free Copies:** Lake Health District, at direction of its Board of Directors or the District Chief Executive Officer may furnish copies without charge or at a substantially reduced fee if they determine that the waiver or reduction of fees is in the public interest because making the record available primarily benefits the general public. ORS 192.324(5)

Signature: _____ Date: _____