

REQUEST FOR DISCLOSURE OF PUBLIC RECORD



3715 Bridgeport Way W
University Place, WA 98466
City_Hall@CityofUP.com
PH: 253.566.5656 FAX: 253.460.2541

DATE OF REQUEST _____

NAME _____ PHONE NUMBER _____

The following records are not maintained by the City of University Place and should be requested through the agencies listed below:

- POLICE REPORTS: [South Sound 911](#)
- POLICE RECORDS: [Pierce County Public Records](#)
- FIRE HAZARDOUS MATERIALS INCIDENTS: [West Pierce Fire & Rescue Station 31](#)
- FIRE INVESTIGATION: [Pierce County Fire Prevention](#)
- HISTORICAL PERMITS (construction prior to 1995): [Pierce County Online Permits](#)

Please describe the records you are requesting and provide any information that will help us locate those records as quickly as possible. Use appropriate document title and date, if known.

How would you like to receive the records?

View Records: Paper Copies: Scans/Email:

PROVIDE INFORMATION FOR THE CITY'S USE IN DELIVERING RESPONSIVE RECORDS:

EMAIL ADDRESS _____
OR
MAILING ADDRESS _____

THIS SECTION IS NECESSARY ONLY IF REQUEST INCLUDES LISTS FOR COMMERCIAL PURPOSES:

Lists for Commercial Purposes

Washington State law, RCW 42.56.070(8), prohibits the City from providing access to lists of individuals requested for commercial purposes. "Commercial purposes" means that the requestor requesting such information from the public records of the City intends to use the information to contact or in some way personally affect the individuals identified on the list and when the purpose of the contact would be to facilitate the requestor's commercial activities.

- I hereby declare, under penalty of perjury under the laws of the State of Washington, that the list of individuals I have requested from the City of University Place under this request for public records will not be used for commercial purposes. Signature of Requestor _____

***** City Staff to complete the reverse side of form upon receipt of request and immediately submit form to the City Clerk's Office.**

FOR OFFICIAL USE ONLY

ACTION ON REQUEST FOR PUBLIC RECORDS MUST BE TAKEN WITHIN FIVE (5) BUSINESS DAYS (SEE R.C.W. 42.17.320)

1. Request Received by: _____ Date Received _____.

2. Action taken:

Request Granted and Record/Response Letter Provided on _____.

Record Provided via mail/email.

Record Ready for Pickup/Review/Purchase at City Hall.

Request forwarded to Attorney for review on _____.

Letter of Additional Time Required to Respond Sent on _____ Response Due _____.

Record Request Denied. Response Letter Sent _____.

Record Withheld in Part. Response letter sent _____.

3. Number of Copies _____

Account # 1923/001.000.341.60.000

Total Charges _____

Receipt # _____
