

CITY OF WESTON 114 E Main Street PO Box 579 Weston, OR 541 566-3313

PUBLIC RECORDS REQUEST FORM

Date of Request:				
Name of Requestor:				
Address:				
Phone:	Email			
Records or Documents be requested (please be specific)			
Use the back of this sheet if more room is that will help City Staff locate the request it	·	tional bac	kground inf	ormation
Do you want these records mailed to you?	(cost pf postage will be added)	#Yes	#No	
ORS 192 contains exemption to the public to reimburse for actual cost in the making the City will determine of the requested re estimate. The requester must confirm thei being completed. A deposit may be require more.	public records available. Upon cord is exempt from disclosure rrequest after receiving the co	receipt of and will p st estimat	this writter rovide a co e prior to tl	n request, ost he request
Requestor Signature				
For City Use Only				
Estimated Cost: Information Complied By: Amount Due: Date Pick-up:	Requester confirmed Date Completed Date Notified Receipt#	#Yes 	#No 	

PROCEDURE FOR PUBLIC RECORDS REQUEST

1) Complete and return the Records Request Form with as much information as possible.

City of Weston

114 E Main PO Box 579

Weston, OR 97886

541 566-3313

Photocopies (B/W)

And/or federal law.

- 2) The City will provide a cost estimate and must receive confirmation that you want the City to proceed with your request. A deposit fee may be required if the estimate cost is \$25 or more.
- 3) The City will provide an estimate date you may pick up your records or when they will be emailed or mailed.
- 4) If you are requesting to inspect records at City Hall, you will be called with an available time to inspect the records. A place for one person will be provided for reviewing the records. One file at a time will be made available. Any pages you wished copied should be marked with sticky noted provided by the city.
- 5) When your inspection has been completed, return the last file. If staff is available the copies will be available at that time. If staff is not available to copy the requested pages at the time you will be notified when you can receive the copies. A fee will be charged to cover a staff member's time for remaining in the room with the files.

GENERAL FEES

(A listed in the City Fee Schedule)

\$0.25 per page

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Photocopies (Color)	\$1.00 per page
Fax	\$1.00 up to 3 pages
Record request	
Cassette Tape	\$30.00
Addition copies of Tape	\$15.00
Staff Research Rate	\$15.00 per 15 minutes
CITY RESPONSE TO	REQUEST
(Please check one)	
_ The City is not in possession of the request reco	rds.
_ Further information is required to clarify the rec	quest. Please provide additional
Information	
_ Copies of the request records are attached. Est	imated Cost is \$
It is uncertain that the City is in possession of th	e records.

The public record(s) requested are exempted from public disclosure under state