

Arlington Rural Fire Department  
Snohomish County Fire District #21  
Phone: 360-435-3311  
**REQUEST FOR PUBLIC RECORDS**

Name of Requestor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Date of Request \_\_\_\_\_ Time \_\_\_\_\_

Email address \_\_\_\_\_ Fax # \_\_\_\_\_

**NATURE OF REQUEST**

Identification of records: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inspection only \_\_\_\_\_ Number of paper copies \_\_\_\_\_ @ \$0.15/page Fax \_\_\_\_\_

Scanned \_\_\_\_\_ @ \$0.10/page Digital Media Storage \_\_\_\_\_ @ \$1.00/disk

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

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**For Office Use Only:**

1) Request	Fee	Record	Record withheld
Granted _____	Recvd. _____	Withheld _____	in Part _____

Date _____	Time _____	Initials _____
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2) If withheld, name the exemption contained in RCW 42.17.310 which authorizes the withholding of the record or part of the record: Subsection (1) (\_\_\_\_\_).

3) If withheld, explain how the exemption applies to the record withheld: \_\_\_\_\_

\_\_\_\_\_