REQUEST FOR PUBLIC RECORDS UNDER RCW 42.56 SNOHOMISH COUNTY

PROSECUTING ATTORNEY 3000 ROCKEFELLER AVE., M/S 504

EVERETT, WASHINGTON 98201 (425) 262-2246

Requestor Name: First:	MI:	Last:			
Address:	City:	State:	Zip:		
Email Address:	Phone number				
If records pertain to you, provide: Date	of Birth:	Case #:			
Name of involved individual: First:		Middle:			
Last:	Date of Bir	rth:			
Court and/or case number:					
Description of records i.e; police report, specific as possible in order to efficientl easily identifiable documents are often response**):	y process your	request. Requests for s	specific and/or		
Does requested record contain a list "yes", please complete the attached Fo (attach completed form 2 to request)	rm 2 before acc	ess to record requeste			
This Request is for Civil Redress Pu	rposes [1			
FOR OFFICE USE ONLY	Pul Sno	turn to: blic Disclosure Specialist bhomish County Prosecu 00 Rockefeller Avenue, M	tor's Office		

Everett, WA 98201-4046

DECLARATION TO RELEASE LIST OF INDIVIDUALS

STATE	OF WA	SHING					
COUNT	TY OF S	NOHON	SS (IISH)				
Name Reque							
Addre	ss:	-					
On oa	th says	S :					
1.			ested access t of individu	s to, or copies of, ials:	the following	public records	which
2.				42.56.070(9) prohi ess to lists of ind			
3.				mercial purposes' profit-expecting ac		the list will be u	sed for the
4.		erstand liabilit		e of said records	for commerci	ial purposes m	ay subject
5.	Note:	Pleas	e cross out	either a or b belo	w, whichever	does not apply	:
	a.		not use, and nercial purp	d, I will prevent ot oses.	hers from usi	ng, said record	ls for
	b.			duals I request is opying is specific			
			nalty of perju	ury under the laws	s of the State	of Washington	that the
Detect	_			(month/day/yea	•		/ait. 0 -4-4-\
Dated	_			_ at			(city & state)
Signat		Reque	stor				
Printe Name:	d	reque	3.GI				

PRA Fee Schedule

This fee schedule applies to all requests submitted August 9, 2017, and later 1

Paper copies	15 cents per page
Scanned copies	10 cents per page
Records uploaded to email, cloud-based	5 cents per every 4 electronic files
storage, CD/DVD, or flash drive	
Records transmitted in electronic format	10 cents per gigabyte (GB)
Digital Storage Media Device (CD/DVD,	Actual Cost
<u>flashdrive</u>)	
<u>Envelope</u>	Actual Cost
<u>Postage</u>	Actual Cost
Customized Service Charge	When the request would require the use of IT
	expertise to prepare data compilations or
	when such customized access services are not
	used by the agency for other business
	purposes. The agency may charge the actual
	cost. The agency must notify the requestor
	that it will be doing a customized service and
	can require a 10 percent deposit.

Examples:	Installment contains	327 scanned pages x 10 cents per page 79.84 MB 68 electronic files / 4 = 17 x 5 cents CD w/ Sleeve and label Envelope	\$0.00 \$0.85 \$0.25 \$0.35
		Postage <u>Total:</u>	\$3.15 \$37.05
	Installment contains	200 emails / 4 = 50 x 5 cents 116,329 KB	\$2.50 \$0.00
		Flashdrive Envelope Postage	\$8.00 \$0.35 \$3.15
		<u>Total:</u>	\$14.00

Snohomish County waives fees for production of records if production totals less than \$1. Production of records does not include actual cost of digital storage media device, envelope, and postage.

Snohomish County always charges actual costs of digital storage media device, envelope, and postage (if applicable).

¹ Adopted by Snohomish County Council on August 9, 2017. See Emergency Ordinance 17-055

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