

Tracking No.:
(for WF&R use)

Woodinville Fire & Rescue

17718 Woodinville-Snohomish Road NE

P.O. Box 2200

Woodinville, WA 98072-2200

Phone: 425-483-2131 Fax: 425-486-0361

Received Date: _____

Received Time: _____

Request for Public Record - Incident Report

Request Made By: _____ Request Date: _____

Address: _____ City, State: _____ Zip: _____

Home Ph.: _____ Work Ph.: _____ Cell Ph.: _____ Fax: _____

Request received via: In Person US Mail E-mail Customer's E-mail Address: _____

Nature or description of the incident or record for which you are requesting a copy.

Date of incident: _____ Name(s) of Person(s) involved: _____

Address/Location of incident: _____

I certify that the information obtained through this request for public record will not be used for commercial purposes.

Relationship to person(s) involved: _____

Signature: _____

Per RCW 42.56.520, Woodinville Fire & Rescue (WF&R) will respond to any request for public record within five (5) business days by either (1) providing the record; (2) acknowledging the request has been received and providing an estimate of time WF&R will require to respond to the request; or (3) denying the public record request.

FOR WF&R USE ONLY

No Record on File Request Granted Record Withheld Record Withheld in Part

If withheld, or withheld in part, briefly explain how the exemption applies to the record withheld or withheld in part:

If requested granted, date: _____ Time: _____

Public Records Officer: _____ Approx. Time Spent Fullilling the Request (round to the quarter hour): _____

Please send email requests as an attachment to: WFRpublicrecordsofficer@wf-r.org

Fee: Copies - \$.15 per page (RCW 42.56.120)

