

## **CITY OF LYONS**

449 5<sup>th</sup> Street Lyons, OR 97358

Phone: (503) 859-2167 Fax: (503) 859-5167 cityoflyons@wavecable.com

## PUBLIC RECORDS REQUEST

Name:	Phone #:
Address:  I request: inspection / copies of the following records in you (circle one)	our office: (please be specific)
I understand that every person has a right to inspect any public record of a public 192.445, 192.447, and 192.501 to 192.505. Further, I understand that fees will records available. Such calculation may include staff time, copying and preparat my request. I hereby request that the City of Lyons staff produce, to the best o required for charges estimated to be over \$20. If the City fails to find these public disclosure, I will still be responsible for paying the accumulated cost for the staff the control of the staff that the control of the	be charged to reimburse the City for its <b>actual cost</b> in making the tion, costs for summarizing, compiling, or tailoring a record to meet of their ability, the records specified above. Payment in advance is public records or finds that these public records are exempt from
Signature of Requestor	Date of Request
The City shall provide a response to this information request with  [ ] The City is not in possession of the requested records;  [ ] Further information is required to clarify the request. Please	
[ ] Copies of the requested records are attached. [ ] The City is in possession of at least some of the requested It will take approximately	the records.  for the records.
Number of copies made x \$/size (dependent)	dent upon size) = \$
Attorney review time x \$/hr. (	) = \$ = \$ = \$ = \$

## PROCEDURES FOR PUBLIC RECORDS REQUEST

- Complete and return the Records Request form with as much detailed information as you can. For records requests, return this form to Lyons City Hall. Mailed requests should be sent to: City of Lyons, Attn. Records Request, 449 5<sup>th</sup> Street, Lyons, OR 97358.
- 2. The request will be stamped with the date received.
- 3. The City will provide a response, either written or verbal, to your records request within seven (7) calendar days. If the request is for substantial documentation, we will provide you with an estimate as to the anticipated time staff necessary to review the records and the approximate cost to compile the requested information. Written confirmation MUST be received that you want the City to proceed with your request within 30 calendar days of the date of our estimate. Estimates over \$20 will be paid in advance. If payment is not received within 30 calendar days of notification to the requester, the request will be considered withdrawn.
- 4. Any request(s) to inspect records shall be made in advance, by scheduling an appointment to afford staff the opportunity to assemble the records requested.
- 5. If you are requesting to inspect records at City Hall, a place will be provided for reviewing the file(s). Any pages to be copied should be marked ONLY with sticky notes provided by the City.
- 6. When your inspection has been completed, the copies will be made at that time *if staff is available*. *If staff is not available* to copy the requested pages at that time, a timely estimated date of completion will be provided. You will be called at the phone number on this form once staff has had time to copy the requested pages.