TOWN OF YARROW POINT
4030 - 95th Avenue NE
Yarrow Point, WA 98004
(425) 454-7899

PUBLIC RECORD REQUEST FORM

CONTACT INFO
FULL NAME:

MAILING ADDRESS:

PHONE NUMBER:

EMAIL ADDRESS:

REQUEST
REQUESTED RECORD:
Please provide a detailed description of identifiable public records. The more specific your request, the more quickly we can process and deliver responsive records.

DELIVERY
Inspection (Free)
E-mail or CD (Cost Varies)
Paper Copies (15 Cents per page)
Site Plans/Blue Prints/Drawings (Cost Varies)
*For multi-medium request, the Town will determine the most efficient mode of copying. Requestor will be charged accordingly.

Requestor will be charged costs associated with copying, delivering, and mailing the documents.

☐ I’d like to view the documents at Town Hall.

☐ I’d like a CD with the documents.

☐ I’d like the documents emailed to me.

☐ I’d like paper copies of the documents.

INTAKE - STAFF USE ONLY
☐ In-house Response Date Fulfilled: By:

☐ Request too broad, seek clarification. Date By:

☐ Requires Installments. Initial Response. Date By:

☐ Request Fulfilled: Date By: