PARMA RURAL FIRE PROTECTION DISTRICT
PUBLIC RECORDS REQUEST FORM

[This is a 5-page form]

STEP NO. 1 REQUESTER COMPLETES THIS PAGE AND FILES REQUEST:

Idaho Code § 74.102 provides the procedures for reviewing and/or copying public documents. All requests to examine or copy public records MUST BE MADE IN WRITING. Please complete this form. All copies made are subject to a copying cost that may be required prior to receipt of records. All requests received after normal business hours (excluding holidays) shall be deemed received the next business day.

PLEASE TYPE OR PRINT LEGIBLY

Name of Requester: _____Date of Request: _____

Company *(if applicable)*:_____

Address:_____Phone: _____E-mail: _____Fax:_____

I Request to Receive the Response to My Public Records Request in the Following Format: (**CHECK ONE**) ☐ Mail ☐Phone ☐ E-mail ☐ Fax

Description of the Public Records Requested:

NOTICE TO REQUESTER

Estimate of Fees: Idaho Code Section 74-102 (12) provides: In the event the Secretary, as the custodian of the records, in the process of this request determines that completing this request is likely to involve the production of more than 100 copies, or involve more than 2 hours of staff time, and/or will involve legal advice for review and redaction, the Secretary will estimate those fees and provide written notice to the Requester requiring advance payment of those estimated fees. If the estimated fees are then paid the Secretary will proceed with the Request. Funds received will be credited to the Requester's account. Any portion of an advance payment of fees by the Requester, in excess of the actual costs incurred in responding to the request, shall be returned to the requester.

In the event the Secretary provides written notice requiring advance payment of estimated fees this request will not be considered received until advanced payment has been made by the requester.

Exemptions from Fees

No fee for labor or copying shall be charged in the event the requester demonstrates that the requester's examination and/or copying of public records:

- Is likely to contribute significantly to the public's understanding of the operations or activities of the government; and
- Is not primarily in the individual interest of the requester including, but not limited to, the requester's interest in litigation in which the requester is or may become a party; and
- Would not otherwise occur because the requester has insufficient financial resources to pay such fees.

☐ I am not claiming an exemption.
☐ I am claiming an exemption based upon the following:
[Set out your factual basis, addressing all three above stated requirements, demonstrating a basis for the claim of exemption and attach to Public Records Request.]

Signed: _____ Date: _____
Requester

FOR OFFICIAL USE ONLY BELOW THIS LINE

Routing and Response

STEP NO. 2: COMPLETED BY CUSTODIAN OF THE FIRE DISTRICT RECORDS

☐ Preliminary Determination Action:

NOTE: Initial only where applicable to request. If not applicable, leave blank and proceed to Step No. 3.

☐ Response will take up to ten (10) days to locate and retrieve the public records requested.	Requestor Contacted: Date:_____ Initial:_____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax
☐ Request may be denied or subject to redaction and will require review by the District's Attorney.	Requestor Contacted: Date:_____ Initial:_____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax Attorney Notified for review: _____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax
☐ Request is broad in scope and/or is likely to include voluminous materials or involve more than two (2) hours of labor; information provided to requester to narrow scope of request.	Requestor Contacted: Date:_____ Initial:_____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax
☐ Requester(s) has/have made multiple requests. Notice provided to requester(s) that requests have been aggregated and appropriate fees will be charged.	Requestor Contacted: Date:_____ Initial:_____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax
☐ **Notice of Advance payment of fees required**. [Advance fees to be credited to the Fire District's general fund. If advance payment exceeds the fees charged, the difference shall be returned to the requester.]	Requestor Contacted: Date:_____ Initial:_____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax

STEP NO. 3A: COMPLETED BY CUSTODIAN OF THE FIRE DISTRICT RECORDS WHEN REQUEST GRANTED.

NOTE: Custodian of the Records Completes Request, As Appropriate.
(Granted-A- or Denied-B)

☐ **Request Granted**		
Initial:	Date:	Request Completed By: _____ Completion Date: _____
Initial:	Date:	Requestor Contacted: _____ Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax Mail ☐ Phone ☐
Initial:	Date:	Date Request Obtained: _____

Complete Statement of Estimated Fees (To be charged):

# pages copied: _____	x .10 cents per page =	$
# hours worked: _____	x $15 if request exceeds one-hundred (100) pages or two (2) person hours =	$
# records certified: _____	x $1 per record =	$
Attorney hours: _____ [if redaction is required]	x $150 per hour =	$
	Total Cost	$

Identify Documents Attached to Response of Public Records Request:	
Document Description	**Bates Numbered**

STEP NO. 3B: COMPLETED BY CUSTODIAN OF THE FIRE DISTRICT RECORDS WHEN THE REQUEST IS DENIED IN PART INCLUSIVE OF REDACTIONS OR DENIED IN TOTAL.

NOTE: Custodian of the Records Completes Request, As Appropriate.
(Granted-A- or Denied-B)

☐ **Request Denied in Part and/or Redacted:** Statutory Basis for Denial in Part and/or redaction: **Fire District Attorney's Review:** You are advised that the District's Attorney has reviewed your request. **Notice of Right of Appeal:** You are hereby notified that you have a right to appeal this partial denial response by instituting a proceeding in the District Court of the State of Idaho within one-hundred eighty (180) calendar days from the date of mailing of this notice of denial as provided in Idaho Code § 74-115.	**Requestor Contacted:** Date: _____ Initial:_____ **Notification by:** ☐ Mail ☐ Phone ☐ E-mail ☐ Fax
☐ **Request Denied in Total:** Statutory Basis for Denial: **Fire District Attorney's Review:** You are advised that the District's Attorney has reviewed your request. **Notice of Right of Appeal:** You are hereby notified that you have a right to appeal this denial response by instituting a proceeding in the District Court of the State of Idaho within one-hundred eighty (180) calendar days from the date of mailing of this notice of denial as provided in Idaho Code § 74-115.	**Requestor Contacted:** Date: _____ Initial:_____ **Notification by:** ☐ Mail ☐ Phone ☐ E-mail ☐ Fax **Attorney Notified for Review:** Notification by: ☐ Mail ☐ Phone ☐ E-mail ☐ Fax

Signed: _____ Date: _____
Custodian of Records, Parma Rural Fire Protection District