

Public Records Request Form

CITY OF MYRTLE POINT

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Detailed Description of Requested Record(s) (If more room is needed, please attach additional pages describing the records requested):

The City of Myrtle Point ("City") will respond to your request within the time provided by Oregon Law. The City may charge a fee for responding to your records request and will advise you of the fee to be charged at the time the City provides its initial response to your records request.

I have read and agree to comply with the above conditions, and further agree to pay the costs associated with fulfilling my Public Records Request, which may include the cost of searching for records, reviewing the records to redact exempt materials, supervising any on-site inspection of records, copying records, certifying records if requested and mailing records. I agree to pay a maximum of up to \$25.00 to the City to fulfill my Public Records Request unless the City advises me of the estimated cost and I approve such cost

Signature of Requester

This form may be submitted in person or by mail to:

City Manager
City of Myrtle Point
424 5th Street
Myrtle Point, OR 97458