



PUBLIC UTILITY DISTRICT NO. 1 OF FERRY COUNTY

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BOARD OF COMMISSIONERS
 DISTRICT NO. 1 CHRIS A. KROUPA
 DISTRICT NO. 2 DAN L. FAGERLIE
 DISTRICT NO. 3 DOUG R. AUBERTIN

REQUEST FOR DISCLOSURE OF PUBLIC RECORDS

INSTRUCTIONS:

Requestor completes Section B and returns to the PUD at address listed above.

PUD Customer Service Representative completes Section A and routes to appropriate management personnel.

PUD management personnel completes Section C and D

SECTION A: FOR PUD USE ONLY

Date

Request Received by

This completed form is an open public document and may be released to any requestor.

SECTION B: Requestor/Records Request Information

Requestor Name:		Phone Number:		Email Address:	
Address:			City:		State: Zip:
I wish to <input type="checkbox"/> inspect <input type="checkbox"/> receive a copy of the following specific record(s)				Request Made:	
				<input type="checkbox"/> in person <input type="checkbox"/> by phone <input type="checkbox"/> by fax <input type="checkbox"/> by mail <input type="checkbox"/> by email Attach request if applicable	
If record(s) concern individual(s) other than requestor, please state name(s):				If this request is for a list of individuals, is the list to be used for commercial purposes? Yes No	
Signature of requestor				Date of Request	

SECTION C: FERRY COUNTY PUD Response

ALLOW ACCESS Charge is \$.15 for each black and white photocopy.

WE DO NOT HAVE RECORD(S)

DENY ACCESS The records you have requested are legally exempt from public disclosure by the following authority:

SECTION D: Requestor Notification

Person contacted:		Date:	Time:
<input type="checkbox"/> by mail <input type="checkbox"/> by phone <input type="checkbox"/> in person <input type="checkbox"/> by email		I made the district's final response as stated. Signature:	