

Public Records Request and Discovery

West Linn Police Department

22825 Willamette Drive

West Linn, OR 97068

503.655.6214



Submit request to:

West Linn Police Department, Fax: 503.656.0319 or E-mail: wlpdrecords@westlinnoregon.gov

Name: _____	Phone: _____	Date of Birth: _____
Address of Incident: _____		E-mail: _____
City/State/Zip _____	Case Number: _____	
Date of Incident: _____		
Name of involved parties: _____		

Provide detailed description of purpose for request. Add any additional information you believe would be helpful in retrieving your documents (*Attach additional sheet if needed*):

REQUESTOR TO READ AND SIGN UPON SUBMITTING REQUEST

I understand that every person has a right to inspect any public record of a public body in this state, except as otherwise provided by ORS 192.496 to 192.505. I understand that the documents or records requested may not be immediately available for my review and that I may need to make an appointment to review the documents or records. I acknowledge that there may be a cost for the research time to retrieve the requested records and costs for duplication of requested documents. If research time is required, I understand I will be notified of the estimated cost prior to retrieving the documents or records. I also understand that prepayment for research time and copies may be required. I acknowledge that any documents or records made available to review must not be disassembled and must be left intact, and that I cannot make copies myself.

Signature of Requestor

Date

Business Name (*if applicable*): _____

FOR INTERNAL USE ONLY

COPIES: ☐ Citation ☐ Narrative ☐ Officer Field Notes ☐ Pictures ☐ Other _____

(See fee schedule for ALL costs)

Copies: \$15.00 (first 10 pgs.) # Copies made: _____ \$ _____
\$.25 ea. (10+)

Research fee (\$15.00 per 15min): _____ Length of time: _____ \$ _____

Audio CD's fee (\$35.00 for 1) _____ Number of copies: _____ \$ _____

Other media or materials: _____ Specify: _____

Total amount received \$ _____

☐ Approved: _____
(Initial)

☐ Denied: _____
(initial)

Reason: _____

INSTRUCTIONS FOR REQUESTING PUBLIC RECORDS *

1. Requests must be in writing using the form provided. (Please note, the Police Department will not create a new document in response to a records request.)
2. Submit request to the West Linn Police Department, 22825 Willamette Drive., West Linn, Oregon, 97068, or by fax at 503.656.0319, or by e-mail at wlpdrecords@westlinnoregon.gov.
3. The Police Department shall respond to all requests as soon as practical and without unreasonable delay within five (5) business days or, within seven (7) business days will explain why more time is needed for a full response.
5. If the request is larger than the initial cost schedule for Police reports, the Police Department will submit a cost estimate to the requestor outlining costs for requested documents, including copying charges, research time (if required), and separating exempt from non-exempt materials.
6. If the estimated cost is \$25.00 or more, the Police Department shall require a deposit in the full amount of the estimate before fulfilling the request. If the actual cost exceeds the estimate, the Police Department will not release the documents until the fee is received in full.

FEE SCHEDULE FOR MISCELLANEOUS CITY SERVICES

Photocopying

Black & White and Color Copies:

1-10 pages	\$15.00
10+ pages (per page)	\$0.25
CD Duplication (per event/meeting, and or documents)	\$35.00
	\$15.00
	each adtl.
Annual Budget (per copy)	\$25.00
Municipal Code Supplements – per printing	Varies
Research Cost: Staff hourly wage, plus benefits	\$15.00 per 15minutes