Public Records Request Instructions and Fee Schedule

1. Requests must be in writing using the public records request form.

2. Submit request by mail to 10200 S. McAlister Rd La Grande, OR 97850 or by e-mail at secretarylgrfpd@gmail.com.

3. If inspection of documents is preferred over copies, such inspection shall occur during normal business hours (9am-5pm), unless otherwise arranged.

4. LGRFPD will submit a cost estimate to the requestor to provide the requested documents, including copying charges, research time (if required), and separating exempt from nonexempt materials. There is no research cost for the first ½ hour of staff time. Requestor must confirm to LGRFPD to proceed with the request following receipt of the cost estimate.

5. If the estimated cost is $25.00 or more, LGRFPD shall require payment in the full amount of the estimate before fulfilling the request. If the actual cost exceeds the estimate, LGRFPD will not release the documents until the fee is received in full.

6. If the estimated cost is less than $25.00, LGRFPD will fulfill the request and present the requestor with an invoice to be paid before release of the documents.

FEE SCHEDULE

Photocopying charges:

- 1-20 pages (per page) $0.25
- 21-50 pages (per page) $0.15
- 50+ pages (per page) $0.10

Staff hourly wage ($45/hr) (first ½ hr. free)

Tom- Kyle

Public Records Request

Submit this completed request to La Grande Rural Fire Protection District by mail 10200 S. McAlister Rd La Grande, OR 97850 or email at secretarylgrfpd@gmail.com.

Please fill out each field in the form below to request public records from La Grande Rural Fire Protection District. You will receive a receipt of submittal by email when your request is received. Please be aware that our staff our emergency responders so response may be delayed.

Requester Name: _____ **Date of Request:** _____

Organization Name (if applicable): _____

Mailing Address: _____

_____

City *State* *ZIP Code*

Phone: _____ **Email** _____

Provide a detailed description of the documents you are requesting:

I request that the documents be provided in the following format:

- ☐ I wish to arrange an opportunity to personally inspect the requested records.
- ☐ I wish to receive a hard (paper) copy of the requested records.
- ☐ I would like to have these records provided to me an electronic format.
- ☐ Other format (describe) _____

Signature: _____ **Date:** _____

Your signature indicates that you understand that LGRFPD will respond to your request by email as soon as practicable. You understand that there may be costs related to this request based on the fee structure adopted by the LGRFPD, and you are aware that you will be notified by staff if any fees need to be paid in order to complete your request.