

SPOKANE VALLEY FIRE DEPARTMENT
SAFETY & OPERATIONS MANUAL

Information Release (#121)

Person Responsible: Human Resources Director

Page 5 of 5
Adopted: 02/16/05
Revised: 07/13/15
Reviewed: 08/02/16

Appendix B: Request for Public Records

FAX: 509-892-4127 OR **MAIL:** 2120 N. Wilbur., Spokane Valley, WA 99206

In Accordance with the provisions of RCW 42.56 the following information is required for release of public records:

REQUESTING PARTY INFORMATION: **DATE REQUESTED:** _____

NAME: _____ **PHONE NO:** _____

ADDRESS: _____

PURPOSE OF REQUEST (NOT REQUIRED):

- INSURANCE REPRESENTATIVE NEIGHBOR INVESTIGATOR
 OWNER/OCCUPANT OTHER _____

INFORMATION/ DOCUMENTS REQUESTING:

- FIRE REPORT BUILDING INSPECTIONS
 MEDICAL REPORT OTHER _____

DATE OF INCIDENT: _____ **INCIDENT ADDRESS:** _____

PATIENT NAME: _____

*** Medical records will not be released without proper authorization from the patient and appropriate identification from the requestor.**

REQUESTING PARTY'S SIGNATURE: _____

FEES: Call for Total
• POSTAGE *To be determined* • COPIES \$0.15 PER PAGE
• CD W/PHOTOS (IF AVAILABLE) \$0.30 PER CD

PAYMENT BY CHECK ONLY: MADE PAYABLE TO: SPOKANE VALLEY FIRE DEPT.

----- Department Use Only -----

RECORDS RELEASED BY: _____
INVESTIGATOR SIGNATURE DATE

FIRE MARSHAL/CHIEF OFFICER APPROVAL DATE

Revised 06/01/13

PAID \$ _____ RECEIPT# _____