



For Official Use Only
Date Received: _____

REQUEST FOR ACCESS TO PUBLIC RECORDS

Please Print

Today's Date: _____

Requester's Last Name *First Name* *Middle*

Requester's Physical Address *City* *State* *Zip*

Daytime Phone *e-mail Address (Please type or write legibly)*

Please indicate the public record(s) you are requesting to review: _____

***If requesting police records and/or body-worn camera recordings, see the next page to complete your request.*

Choose Delivery Option*:

- Electronic Release** (please clearly write or type your email address above)
- Mail the Records**
- Call me when the records are ready for pickup**
- Certified records needed (\$5.00 per stamp and other charges will be applied)**

**Please note that costs may apply for scanning or copying; additional costs may apply for large formats such as plans or images that require duplication using an approved third-party vendor*

-PLEASE READ IMPORTANT INFORMATION ABOUT YOUR RECORDS REQUEST-

The City is committed to providing the fullest assistance possible in providing access to its public records. The City will respond to this request no later than 5 business days after receipt, not counting the day it is received. If the request requires more than 5 business days to complete or requires clarification you will be provided an estimated date when you will receive your records or be asked to provide clarification.

For a complete explanation of the foregoing and a review of the other laws relevant to public disclosure requests, please see [Chapter 42.56](#) of the Revised Code of Washington and [Kirkland's Public Records Act Rules](#).



CITY OF KIRKLAND POLICE DEPARTMENT

POLICE RECORDS REQUEST FORM

Please Print

Today's Date: _____

Requester's Last Name First Name Middle Date of Birth

Requester's Physical Address City State Zip

Daytime Phone e-mail Address (Please type or write legibly)

Case Number: _____

Record Requested

- Traffic Collision Report Police Report Include Body Worn Camera Video? (Fees May Apply – see Fee Schedule)
- Other (Specify): _____

If you do not have a case number please provide the date, time and location of incident. Also list any other information including but not limited to the parties involved. If more room is needed to explain your request please use the back of this form. Failure to provide such information will result in a delay, as we will need to contact you to gather this information in order to process your request.

Your Relationship to the Case: (Required to be eligible to avoid fees for Body Worn Camera Video per RCW 42.56.240(14)(e))

- Defendant Victim Witness
- Parent or Legal Guardian (may require proof) Vehicle/Property Owner Attorney of: _____
- Other Directly Involved Person Other: _____ (more room on back)

Choose Delivery Option:

- Electronic Release (please clearly write or type your email address above)
- Mail the Records
- Call me when the records are ready for pickup
- Certified records needed

.....CITY OF KIRKLAND FEE SCHEDULE

1.The City charges a rate of \$0.84 per minute of body worn camera (BWC) video redaction time to requesters that are not exempt from charges under RCW 42.56.240(14)(e). This rate applies to the time it takes to redact BWC video, not the length of the video. For example, targeted redaction time is estimated to take 10 minutes of redaction time per object/subject targeted per minute of original video. Targeted audio redaction time is estimated at 5 minutes per minute of original audio. If the total estimated cost of redaction exceeds \$50.00, a 10% deposit may be required prior to the City beginning to process redaction of BWC video. The City reserves the right to charge other costs including but not limited to what a vendor will charge us to process media that is part of your request.

2.The City reserves the right to charge a fee of \$5.00 per **certified record** and the actual cost for postage. *Please see the full fee schedule under the Request Public Records page that lists **Public Records Act Rules** for the City of Kirkland on the City's webpage located at: <https://www.kirklandwa.gov/Services/Request-Public-Records>*

..... PLEASE READ IMPORTANT INFORMATION ABOUT YOUR SUBMITTED REQUEST.....

"I understand that the records I request are subject to State public records law, and are subject to redactions and exemptions per the Revised Code of Washington. Any records request submitted to the City of Kirkland's public records portal or via other means is subject to disclosure in accordance with the Washington State Public Records Act, Chapter 42.56 RCW. This means this request is considered a public record. There may be a fee for copies of public records. In accordance with RCW 42.56.520, we will respond within five (5) business days."

Requester Signature Date

Reviewed/Received by: _____

♦ INTEGRITY ♦ HONOR ♦ COURAGE

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