



TIVERTON WASTEWATER DISTRICT

RECORDS REQUEST FORM

Name: (optional) _____

Address: (optional) _____

City: _____ State: _____ Zip Code: _____

Phone: (optional) _____ E-mail address: (optional) _____

Date: _____

Record(s) Requested:

Time period request covers:

Please Note: Per section 38-2-3 (d) Rhode Island General Laws the policy of the Tiverton Wastewater District is that this form be filed with the District General Manager. The General Manager will then forward the request to the appropriate department for response. Per section 38-2-4 of the Rhode Island General Laws, the District will charge a fee of \$0.15 per page for copies of public documents, unless such documents have a fee structure which is prescribed by state statute. Additionally, if the requested information requires research on the part of District personnel, the District will charge a research fee of \$15.00 per hour and/or the cost of retrieving records from storage where the public body is assessed a retrieval fee. The first hour (1 hour) of research, however, will be provided at no charge. If after review of your request the District determines that the requested records are exempt from disclosure for a reason set forth in RIGL 38-2-2(4)(i)(A) through (Y), the District reserves its right to claim such exemption.

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(FOR DISTRICT USE ONLY)

Request taken by: _____ Date: _____ Time: _____

Costs: _____ for copies (\$0.15 per page)

_____ for search and retrieval (\$15.00 per hour after 1st hour)

_____ total amount due