PUBLIC RECORDS REQUEST FORM

To: Custodian of Records, Multnomah County Animal Services.

Records Available: Licenses, Quarantine Information, Citation/Notice of Infraction (NOI), Incident Reports, Appeal Hearing Audio Tapes, Digital Photographs, Case Files, etc.

Records Identification: Animal Control Records are usually identified by any of the following: Animal Registration Number, Complainant/Name, Notice of Infraction/Citation Number, Owner or Operator Name, Quarantine Report Number or Date of Incident. Please provide as much information as possible for us to respond to your request.

The "Case File" is created if a Citation/NOI has been issued. The Case File may contain, but is not limited to any of the above referenced documents.

Name __________________________________________ Mailing Address __________________________________

City ___________________ State __________ Zip __________ Fax _________________

Please fill out the information on reverse side of this form to make your record request.

PUBLIC RECORDS REQUEST COSTS:

1. Copy of Single Document (e.g. NOI): $1.00 per page for the first five pages, $.25 each page thereafter, except as provided below.
2. Copy of Digital Photograph, per photograph: $2.00.
3. Copy of Digital Photograph, on diskette: $5.00 per disc.
4. Copy of Appeal Hearing Audio Tape: $17.50 per tape.
5. Copies of other public records or specialty requests not identified herein will be prorated at the actual cost to reproduce the record.

MULTIPLE RECORDS REQUESTS:

Any request made for multiple records, which apply to different animals or different owners shall be considered to be a separate request for each different owner or animal and billed accordingly.

PAYMENT INFORMATION:

Make checks or money orders payable to: Multnomah County Animal Services.
Requests of $10 or more may be charged by phone on a valid credit card. Payment must be made at the time of request. Requests requiring ten (10) pages or less may be faxed.

Mail or fax request to:

Multnomah County Animal Services, Attn: Field Supervisor, PO Box 698, Troutdale, Oregon, 97060. FAX: 503-988-3002

FOR OFFICE USE ONLY

Date Received: ____________ Date Records Dispatched: ____________

Deposit Received: ____________ Amount Billed: ____________

Form Received by: ____________ Records sent by: ____________

Date Payment Received: ____________

AC 73 12/3/01
PLEASE FILL IN THE BLANKS AS FULLY AS POSSIBLE:

Animal Number ____________________________ Owner Name ____________________________
Complainant/Name ________________________ Quarantine Report Number __________________
Incident/Complaint Number ________________ Date of Incident ____________________________
Notice of Infraction Number ________________ Other Requests ____________________________

TOTAL COST: ______________________________

Animal Number ____________________________ Owner Name ____________________________
Complainant/Name ________________________ Quarantine Report Number __________________
Incident/Complaint Number ________________ Date of Incident ____________________________
Notice of Infraction Number ________________ Other Requests ____________________________

TOTAL COST: ______________________________

Animal Number ____________________________ Owner Name ____________________________
Complainant/Name ________________________ Quarantine Report Number __________________
Incident/Complaint Number ________________ Date of Incident ____________________________
Notice of Infraction Number ________________ Other Requests ____________________________

TOTAL COST: ______________________________