



Yakima Valley Emergency Management  
2403 South 18<sup>th</sup> Street, Ste. 200  
Union Gap, WA 98903  
(509) 574-1900 – Fax (509) 574-1901  
[www.yakimacounty.us/OEM](http://www.yakimacounty.us/OEM)  
[EmergencyManagement@co.yakima.wa.us](mailto:EmergencyManagement@co.yakima.wa.us)

#### PUBLIC RECORDS REQUEST FORM

**RCW CHAPTER 42.56 PUBLIC RECORDS ACT - To be completed by the requesting person, business, or agency.**

Name: (print) \_\_\_\_\_ Agency: \_\_\_\_\_

Address: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Records requested must be identifiable. Please be as specific as possible when requesting records. When possible, please provide timeline (date/year to date/year), names, type of document, etc. Providing specific information will allow us to process your request more efficiently. This form is not intended for general inquiries.

---

---

---

**Method of Record Review – Please select one:**

Do not make copies, but arrange for in person inspection at department, I may request copies of specific records after in person review.

Mail copies       Email       Hold copies for pickup

---

**Signature of Requester**

---

**Date Submitted**

**The following must also be signed ONLY if you request any list of individuals.**

Pursuant to RCW 42.56.070(8), I declare under penalty and the laws of this state of Washington that I will NOT use records containing a list of individuals for commercial purposes.

Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_(city), \_\_\_\_ (state).

Requester's Signature \_\_\_\_\_

If you have any questions or concerns about your Public Records Request, please call the Public Records Officer at (509) 574-1900 or [EmergencyManagement@co.yakima.wa.us](mailto:EmergencyManagement@co.yakima.wa.us).