

WESTERN COVENTRY FIRE DISTRICT
REQUEST FOR RECORDS FORM
Under the Access to Public Records Act

This form is provided to assist you in making a public records request to the Western Coventry Fire District (WCFD) in accordance with the Rhode Island Access to Public Records Act (APRA), R.I. Gen. Laws § 38-2-1 et seq. You are not required to use this form, but doing so may help us respond more efficiently.

Requestor Information

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

Records Requested

Please describe the public records you are requesting with as much detail as possible:

The District may claim exemption to the requested records pursuant to R.I. Gen. Laws §38-2-2-(4)-(i)(A) through (Y), et Seq., after review of your request.

NOTE: If you do not provide identification (name, address, and telephone) the requested records will be available on _____ at the Western Coventry Fire District, Summit Station, 1110 Victory Highway, Greene, RI 02827. Please know your request date and request number upon return.

NOTE: You are not required to provide your name or reason for the request. However, this information can help us process your request more efficiently. WCFD will respond to all requests within ten (10) business days, or provide a written explanation for any delay.

NOTE: In accordance with RI Gen. Laws 38-2-4, et Seq., the District may charge a fee of \$.15 per page for documents copied and/or \$15.00 per hour for document search and retrieval after the first hour. You will be contacted prior to commencing work on your request if the estimated costs will exceed \$25.00.

Delivery Preference

Please select your preferred method of receiving records:

- ☐ Inspect at WCFD office
☐ Email
☐ Mail

Signature: _____ Date: _____

DISTRICT USE ONLY

Request Taken By _____
Date _____ Time _____

Records Available On _____

Records Inspected or Picked Up On _____

Records Request Completed By _____

Costs: Copies	_____	copies x \$.15 =	_____
Search and Retrieval	_____	hours x \$15.00 =	_____
Total Cost			_____

Extension Letter Mailed _____

Records Do Not Exist Letter Mailed _____

Denial Letter Mailed _____