Policy No: LGL-33 Revision No: 4

Effective Date: 04/30/2024

REQUEST FOR DISCLOSURE
OF PUBLIC RECORDS
BY LAW ENFORCEMENT AGENCY



Franklin PUD
Attn: Public Records Officer
1411 W. Clark St. / PO BOX 2407
Pasco, WA 99302

Email: Publicrecords@franklinpud.com Phone: 509-542-5342

This form is provided to allow law enforcement agencies to obtain disclosure of public records in accordance with the Washington State Public Records Act, and the District's Resolution 1263, Customer Privacy.

Authorized law enforcement representatives are required to provide proper identification and sign this form acknowledging the records being requested are being obtained pursuant to the requirements of the Washington State Public Records Act.

For further information, please contact the Public Records Officer at 509-542-5342 or email publicrecords@franklinpud.com.

Legal Process Requirements: The following types of records, or portions thereof, will require a signed warrant and/or subpoena for processing: customer records containing banking information, including routing numbers, social security numbers, and credit card numbers. (This list is all inclusive.)

Requester Information:	
Name:	Date
Type of Identification Pro	vided to District:
Law Enforcement Agency	:
Contact Phone Number:	E-mail:
Requested Records Info	ermation: (please identify the records information being requested).
information from the District this statement, the Requeste that the particular person to	nd sign prior to record/information being provided: This request for customer is being made pursuant to the Washington State Public Records Act. Upon signing a caknowledges that the above information is being requested because they suspect whom the records pertain has committed a crime. The Requester further states that that the records being requested could determine or help determine whether their
Requester's Signature	
PR Request No	(internal use only)