

Public Records Guidelines & Procedure

Requests for public records maintained by the Arcata Fire District, not exempt from disclosure can be made using the attached form. The completed form can be submitted by email, mail, or in-person using the following information:

Email requests to:

info@arcatafire.org

In-Person or mail requests:

Arcata Fire District Request for Records 2149 Central Avenue McKinleyville, CA 95519

In-person, requests must be made during the Administrative Office's regular business hours. Arcata Fire District has 10 days from the date the request is received to respond to the requestor.

While it is free to review records on-site, the District will charge for providing copies of public records in accordance with California law. Copies of the requested public records that are not exempt from disclosure will only be available upon prepayment of fees covering the direct cost of duplication.

Please be advised of the following costs associated with the request:

REPORTS	Fee
Incident Reports (Current Files)	\$10.00
Per report up to 10 pages	
Archive Files Search	\$20.00
Copies at cost	
Copies of Photos, CDs, or Electronic Data	\$20.00 + Material Cost
Subpoenaed Reports (All)	\$24.00
Copies at cost	
Additional Copies at Cost	\$.10
Envelopes:	
Letter Size	\$.12
Large Manila	\$.26



Public Records Act (PRA) Request

Please type or print legibly. Be as specific as possible with your request. The request should be "focused" so that the records can be identified and located with reasonable effort and as quickly as possible. Staff is available to answer any questions that may help the requestor identify their records needs. In accordance with California Government Code Sections 6250-6270 (Public Records Act), I am requesting inspection and/or copies of the following documents. **Incident Report Requests:** Date of Incident: _____ Incident Number (if known): _____ Address or Location of Incident: Names of any person's involved or additional information: Other Types of Records: **Requestor Contact Information:** Name: ______ Phone/Cell: _____ Mailing Address: _____ Email: _____ I declare under penalty of perjury that: \Box I am, \Box I represent, \Box I am an attorney representing, \(\square\) Other(Please specify) the party of interest identified in the incident recorded hereon. Signature Date Arcata Fire District Use Only

Release Date: ______ Emailed/Mailed/In Person (circle one)