

**THE CITY OF WARWICK
PUBLIC RECORDS REQUEST FORM
RIGL 38-2-3 (d)**

Name: (optional) _____

Address: (optional) _____

City: _____ State: _____ Zip Code: _____

Phone: (optional) _____ E-mail address: (optional) _____

Date: _____

Record(s) Requested:

Time period request covers:

Please Note: Per section 38-2-3 (d) the policy of the City of Warwick is that this form be filed with the office of the City Clerk. The Clerk's office will then forward the request to the appropriate department for response. Per section 38-2-4 of the Rhode Island General Laws, the City will charge a fee of .15 per page for copies of public documents, unless such documents have a fee structure which is prescribed by state statute. Additionally, if the requested information requires research on the part of City personnel, the City will charge a research fee of \$15.00 per hour and/or the cost of retrieving records from storage where the public body is assessed a retrieval fee. The first hour (1 hour) of research, however, will be provided at no charge. If after review of your request the department determines that the requested records are exempt from disclosure for a reason set forth in RIGL 38-2-2(4)(i)(A) through (Y), the City reserves its right to claim such exemption.

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(FOR CITY USE ONLY) Request taken by: _____

Date: _____ Time: _____

Costs: _____ for copies _____ for search and retrieval