

PUBLIC RECORDS REQUEST FORM*

City Recorder's Office

925 Main Street Lebanon, OR 97355 (541) 258.4905 Phone (541) 258.4954 Fax Return completed forms to: city.recorder@lebanonoregon.gov

For Police or Municipal Court Records, Please Contact Those Departments Directly

*The City will not recognize/accept any other means of public records requests.

Requester Information (Please print clearly):				
Name:	-	F	Request Date:	
Mailing Address:				
Daytime Phone:		Email Address:		
		Fax Number:		
Preferred method of contact:	Mail		☐ Phone	□Email
Is this request related to a lawsuit in which the City of Lebanon is a party, or a tort claims notice filed with the City of Lebanon? No If Yes, claimant name and incident date: / / / Copies may be furnished without charge or at a substantially reduced fee if the custodian determines that the waiver or reduction of fees is in the public interest because making the record available primarily benefits and will be distributed to the public at large, not an individual or group. Does this request primarily benefit the general public? Yes No If Yes, please describe the particular or specific public benefit below in the "Description of Records Requested" box. Description of Records Requested (Describe in detail the type of document, date, author, title, etc. If you need more room, please attach additional sheet(s). Please indicate if you want to inspect the records or if you need certified copies of the records. If no indication is made, regular copies will be provided):				
Preferred method of receiving the described Note: Additional charges may be assessed, e.g. p		☐ Ma ime for fax		☐ Fax
 The City will respond to your request as soon as pra If the estimated costs involved in fulfilling you require your approval before beginning the rec If the fee estimate exceeds \$100, a 50% depo Full payment of the total amount of costs incureleased. 	r request exceed quest. osit may be requi	f \$25, the C red to begi	City will advise you of th n work.	
I HAVE READ AND AGREE TO COMPLY WITH THE Records Request per the conditions set forth above. Tredact exempt material, supervising the inspection of remaximum of \$25 without further approval.	hese costs may i	include the	cost of searching for red	cords, reviewing records to
Signature of Requester			Date	

Donna Trippett

From: Sara Grill <sgrill@msmlegal.com>
Sent: Wednesday, January 17, 2024 2:03 PM

To: City Recorder

Subject: Public Records Request

Attachments: public_records_request_form_2023_fillable.pdf

Caution! This message was sent from outside your organization.

Good Afternoon,

Attached is a records request for an inspection report at a property. I cannot sign it and scan it due to work from home because of the weather. Please consider this my signature for the request.

Thanks,



CONFIDENTIALITY NOTICE: The materials in this electronic transmission (including all attachments) are private and confidential and are the property of the sender. The information contained in the materials is privileged and is intended only for the use of the named addresses(s). If you are not the intended addressee, be advised that any unauthorized disclosure, copying, distribution or the taking of any action in reliance on the contents of this material is strictly prohibited. If you have received this electronic mail transmission in error, please immediately notify the sender by telephone 503-224-2165 or send an electronic message to sgrill@msmlegal.com, and thereafter destroy it immediately.



City Recorder's Office 925 S. Main Street Lebanon, Oregon 97355

TEL: 541.258.4905 city.recorder@lebanonoregon.gov www.lebanonoregon.gov

CITY OF LEBANON RESPONSE TO PUBLIC RECORDS REQUEST

To: Date:	Sara Grill 01-18-2024 Depart Trippett Deputy City Recorder
From:	Donna Trippett, Deputy City Recorder
Please be	e advised that:
	pies of all available requested public records for which the City of Lebanon does not claim exemption from disclosure are attached.
☐ The	e records have been withheld or redacted based on the following statute or exemption:
∑ The	e City of Lebanon does not possess/is not the custodian of the requested record(s).
No	information. Inspection reports (other than final inspections) are only kept for two years.
it:	require additional information/clarification regarding your request before we can complete (Failure to
res	spond to this within 60 days will require the request to be closed)
☐ The	e City of Lebanon is still processing the request and estimates the request to be complete by
est app req	e City of Lebanon is the custodian of at least some of the requested public records. We imate that the fee for making the records available is \$ Fees over \$25 must be proved prior to starting request being started. If fee exceeds \$100, a deposit may be quired prior to the request being completed. (Fees not paid within 60 days will require the quest to be closed.)
	te/Federal law prohibits the City of Lebanon from acknowledging whether the requested cord(s) exist(s)
	estions regarding this request, please contact the City Recorder at 541.258.4905 or at corder@lebanonoregon.gov
Dat Dat Stat Dat	R CITY OFFICE USE ONLY: e Request Received: 01-17-2024 e Acknowledgement Response was Emailed: 01-18-2024 ff Person: DT/TD e Response was Emailed: 01-18-2024 rel 2 Request (30 min. or less)