HERMISTON MUNICIPAL COURT

180 NE Second Street, Hermiston, OR 97838
Phone: 541-567-6610
Email: court@hermiston.gov

PUBLIC COURT RECORDS REQUEST

Attention Requester:

The form on the next two pages is to be used for general public records requests, for inspection or copies, held by the Hermiston Municipal Court. Requests must be made in writing, using this form, and submitted to: **Court Administrator, Jillian Viles,** at the information above. Police Department and all other City records (City Hall) must be requested separately, through each department, using a similar, but different form. This instruction page does not need to be submitted with the request.

The City shall respond to public record requests within five (5) working days of receipt, excluding staff absences. Oregon law allows City's to recoup costs, from requesters, to fulfill records requests, including: summarizing, compiling and/or tailoring public records, as well as actual costs of staff time spent searching, locating, reviewing, redacting, copying and/or sending records to the requester. The requester will be notified of the fees associated with filling the request. **The total fee is due before the records will be processed**. If the request is denied, a specific reason(s) will be given. Public bodies are not required to explain or answer questions about their public records, nor are they required to create public records where none exist. Fee schedule is included below.

Fee Schedule

****FEES ARE NON-REFUNDABLE****

Paper Copies (per page, per side)- In addition to other fees		Electronic Formats- In addition to other fees	
$0.25	black & white- up to 11x17	Actual Cost	DVD, CD, or USB
$1.00	color & photos- up to 11x17	$35.00	Minimum Charge for copy of Audio & Video Recording, in addition to other fees. ("Lengthy Requests" fee waived for 1st hour of processing.)
Actual Cost	All documents larger than 11x17		
Actual Cost	Nonstandard documents	**Processing Fees- In addition to other fees**	
		Actual Cost	Attorney fees
$2.00 per page	Certification of true and original copy		
$20.00 Flat Fee	Police & Report, including discovery, except court appointments (regardless of page count or electronic format)	$35.00 per hour	*"Lengthy requests" (requests over 15 mins to complete), in addition to other fees. *Fee's charged at 15 min increments. *Requests less than 15 mins to process may be waived, excluding serial requests.

**A waiver or reduction of fees can be given if the requested record(s) primarily benefit the general public. If you'd like to apply for a waiver or fee reduction, please explain how the record benefits the general public or why the City should consider a waiver/reduction of fees for other reason(s): _____

_____

_____

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Requester Information (Please print legibly)

Organization/Business Name (if applicable):	**Date of Request:**
Requester's First & Last Name:	
Mailing Address including City, State, & Zip Code:	
Email Address:	**Daytime Phone:**
Signature:	**Preferred Method of Contact:** ☐ Phone ☐ Email

Request is for:

- ☐ Emailed Copies of Public Records
- ☐ Paper Copies of Public Records (see fee schedule), mailed to the address above
- ☐ Paper Copies of Public Records (see fee schedule), picked up at the Municipal Court
- ☐ Inspection of Public Records (will be reviewed at Municipal Court)

Description of Record(s) Requested: Request must include the following three pieces of information:
1. Full Name, 2. Date of Birth, **AND** 3. Docket # **OR** Citation # **OR** alleged offense description.

Full Name of Involved Person:		**Date of Birth:**
Record Request #1		
Docket #:	**Citation #:**	**Date or Year of Record:**
Alleged Offense:		
Record Request #2		
Docket #:	**Citation #:**	**Date or Year of Record:**
Alleged Offense:		

Please list what documents you would like to receive from the cases?

_____

_____

_____

Do the documents need certified ($2.00 fee per document)?

☐ Yes ☐ No ☐ Yes, only these listed documents:_____

STAFF USE ONLY

Date Received:	**Actual Fees Paid: $**

_____ The fee estimate for this public records request is $_____. This fee must be paid in full prior to file retrieval. You have 60-days (by _____) to pay this amount in full before this request is considered closed. Please keep in mind this fee is an ***estimate*** and may require additional funds.

_____ Copies of all requested records, for which we are the custodian of, and do not claim an exemption for, are enclosed.

_____ The City will require additional time to process this request for one the following reason(s): A) The City is uncertain if we are the custodian of the requested record, B) Staff necessary to complete a response is unavailable, C) Compliance would demonstrably impede the public body's ability to perform other necessary services. Estimated Date of Completion: _____

_____ Requested records, for which we do not claim an exemption, are available for inspection. Please call to schedule an inspection appointment, within 60-days from the completed date below. Records will be unavailable after 60-days.

_____ The Court is not the custodian of the requested record or no longer has the requested record due to retention requirements according to OAR 166-200-0290.

_____ Requested records are exempt from inspection, copying, and/or disclosure under the Open Records Law for the following reason(s):_____
Requester may seek review of the City's determination pursuant to ORS 192.411, 192.418, 192.422, 192.427, and 192.431.

_____ Other:_____

_____

_____ _____

Completed/Denied Date Court Signature