BOUNDARY COUNTY
REQUEST TO EXAMINE OR COPY PUBLIC RECORDS

P.O. Box 419, Bonners Ferry, Idaho 83805
Phone: (208) 267-7212

CONTACT INFORMATION:

Name of person requesting records:		
Mailing Address:		
City:	State:	Zip:
Phone:	Email:	

RESPONDING AGENCY:

Boundary County Planning & Zoning 6447 Kootenai Street, #18 Bonners Ferry, ID 83805	Boundary County Planning & Zoning P.O. Box 419 Bonners Ferry, ID 83805
Phone: (208) 267-7212	Email: planning@ruenyeager.com

RECORDS REQUESTED: (Use additional paper, if needed)

☐ I request to examine and/or ☐ I request copies of these records:

Description of records requested, including record dates:

Media type:

Note 1: Pursuant to I.C. 74-102(10)(b), if the above request is for more than 100 pages or includes records from which non-public information must be deleted, or the request exceeds two person hours, a fee may be charged.

Note 2: I agree that any records obtained pursuant to this request will not be used as a mailing list or telephone number list prohibited by *Idaho Code Section 74-120* or as otherwise required or prohibited by law.

Request: ☐ Approved on: ☐ Denied on : If denied, submitted to agency attorney for review.

Reason:

Rights of Appeal: (IC §74-115) The sole remedy for a person aggrieved by the denial of a request for disclosure is to institute proceedings in the district court of the county where the records are located within one hundred eighty (180) calendar days from the date of mailing of the notice of denial or partial denial by the public agency.

We will respond to this request within **three (3) business days.** If the material requested is not available within the three business days, we will notify you in writing, Idaho Code § 74-103, that said records will be provided no later **than ten (10) business days** following the date of request.

Requestor's signature: _____**Date:** _____