

**MANVILLE FIRE DISTRICT**  
**PUBLIC RECORDS REQUEST FORM**

Date of Request: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town, State Zip Code:  
\_\_\_\_\_

Telephone number:(optional) \_\_\_\_\_ home \_\_\_\_\_ work

Records requested (describe):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the above referenced records are not readily available at the time of your request please indicate whether you would prefer to:

\_\_\_\_\_ pick up the records \_\_\_\_\_ have records sent by certified mail

\*\*Should you wish to pick up the requested records, the records will be available on or before \_\_\_\_\_ and can be retrieved during regular business hours of the Manville Fire District. If after review of your request, the Manville Fire District deems that the requested records are exempt from disclosure pursuant to R.I.G.L. §38-2-2(4)(1)(A) —(Y) inclusive, the district reserves its right to claim any such exemption. If you have requested mailing please provide the mailing address in the area provided above.

**FOR OFFICE USE ONLY**

Records provided: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Partial

Date response provided: \_\_\_\_\_

Costs for records:

Copies \$ \_\_\_\_\_ Search/Retrieval: \$ \_\_\_\_\_

INITIALS \_\_\_\_\_