



Public Records Request Form (For Non-Residents)

Date of Request: _____

Requester's Full Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone Number: _____

Date Range of Records Requested: _____

Description of Records Requested:

I am requesting inspection only I am requesting copies (electronic or paper, if available)

Format Preference (if available): PDF Printed Copies Other

Declaration of Residency:

I acknowledge that I am not a resident of Idaho and that my request is subject to Idaho Code § 74-102 as amended by House Bill 253. I understand that the agency may charge fees for labor, copies, and delivery, and may take up to forty-five (45) days to respond unless unusual or exigent circumstances apply.

Signature: _____