

## MARION COUNTY BUILDING INSPECTION DEPARTMENT

5155 Silverton Rd NE Salem Oregon 97305 PO Box 14500 SALEM OR 97309-5036

PHONE # (503) 588-5147 FAX # (503) 588-7948

## REQUEST FOR EXAMINATION OF PUBLIC RECORDS

DATE:			
I HEREBY REQUEST EXAMINATION	ON OF FILES or D	ATA RELATE	D TO:
(Name)			
(Site Address)			
Please check one:			
<ul> <li>□ Permit Documents</li> <li>□ Inspection Documents</li> <li>□ September</li> </ul>			
☐ SPECIFIC DOCUMENTS:			
Name: (Please Pri	int)		
Signature:			
Mailing Address:			
Area Code/Phone #:			
Area Code/Fax #:			
**************************************	d on the time invested by		
A minimum fee of \$8.75 is required with	this request.		
**************	********	******	*****
Portions of this file are exempt from disclosure.	☐ Yes	$\square$ No	
Minimum Fee Required:	\$ 8.75 (1/4 ho	<u>ur)</u> Receipt: _	By:
Total # Research Hours:hours @ \$35.00 / h	nour = \$	_	
Balance Due:	\$	_ Receipt:	By:
Researched By:	Date:		
Note: Fees are non-refundable. The fees cover the information requested. Research performed is not			