Public Records Request

REQUESTOR INFORMATION

Name: _______________________________ ☐ HF Resident ☐ Press ☐ Non-profit

Mailing Address: ____________________________________________________________

Phone: ___________________ E-mail Address: ________________________________

Preferred method of contact: ☐ Mail ☐ Phone ☐ E-mail

REQUEST DETAILS

1. Is this request related to a lawsuit involving Home Forward? ☐ Yes ☐ No

   If “yes,” enter the case name, court docket number, or other identifying information:
   _______________________________________________________________________

2. Is this request related to a tort claims notice involving Home Forward? ☐ Yes ☐ No

   If “yes,” enter the claimant’s name and, if known, the incident date:
   _______________________________________________________________________

3. If you answered “yes” to question 1 or question 2, are you making this request on behalf of a party in the lawsuit or tort claim? ☐ Yes ☐ No

   If “yes,” enter the name of the party(ies) here, as required by state law (ORS 192.314(2)(a)).
   _______________________________________________________________________

4. Answer this question if you are requesting a fee waiver. A fee reduction or waiver may be possible if Home Forward determines that this request is primarily in the public interest, and granting the waiver would not overly burden Home Forward.

   a. How do you or your organization intend to use the information:
   _______________________________________________________________________

   b. How will the information benefit the wider public:
   _______________________________________________________________________

   c. How do you or your organization intend to share the information with the wider public:
   _______________________________________________________________________
5. Does this request pertain to personnel records?  ☐ Yes  ☐ No

NOTE: If “yes,” please attach a signed release from the pertinent employee(s).

6. For immigration purposes, please choose one of the following statements:

☐ I certify that I AM making this request for the purpose of enforcement of federal immigration laws.

☐ I certify that I AM NOT making this request for the purpose of enforcement of federal immigration laws.

*Choose this option if you are requesting records about yourself for your own immigration application.

DESCRIPTION OF RECORDS REQUESTED

When describing the materials requested, to the extent known and with as much detail as possible, please include the type of document, author, date, subject matter, title, and/or address of any real property at issue. You may attach additional pages, if necessary:

Home Forward will respond to your request as soon as practicable and without unreasonable delay.

We will provide you with a written cost and time estimate for providing the requested documents and require your approval before beginning work.

If the fee estimate exceeds $25 and no fee waiver is granted, a 50% deposit may be required to begin work.

Full payment of the total amount of costs incurred is required before the public records may be inspected or copies released.

I HAVE READ AND AGREE TO COMPLY WITH THE ABOVE CONDITIONS, and further agree to pay the cost of fulfilling this Public Records Request, as applicable. These costs may include the cost of searching for records, reviewing records to redact exempt material, supervising the inspection of records, copying records, certifying records, and mailing records.

Signature of Requestor ___________________________ Date _______________