



Public Records Request Form

Date: _____
First Name: _____ Last Name: _____
Business Name, Affiliation, or Representation: _____
Telephone: _____ Fax: _____
Email: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

Description of public records requested for disclosure:

(Please include as much detail as possible. The more specific, the better we are able to respond to your request. Text field will expand to accommodate request.)

Idaho State Code exempts certain documents from public disclosure, in which case, you will be notified.

USE OF ANY LIST AS A MAILING LIST OR TELEPHONE LIST IS PROHIBITED BY IDAHO CODE §9-348 AND PUNISHABLE BY A CIVIL PENALTY UP TO \$1,000.

I certify that I will not use disclosed information for an illegal purpose. I also agree to reimburse the Idaho Soil and Water Conservation Commission according to the established fee schedule.

Yes

No

Signature of Requester: _____

Send completed form to:

Email: info@swc.idaho.gov

Fax: 208.332.1790

Mail: Soil and Water Conservation Commission
Attention: PRR Coordinator
650 W State Street Room 145
Boise, ID 83702

To solicit a fee waiver, please fill out a Fee Waiver Request Form and submit with your Public Records Request.