



# ODOT PUBLIC RECORDS REQUEST

Please read [instructions](http://www.oregon.gov/ODOT/Forms/2ODOT/0489_instr.pdf) ([http://www.oregon.gov/ODOT/Forms/2ODOT/0489\\_instr.pdf](http://www.oregon.gov/ODOT/Forms/2ODOT/0489_instr.pdf)) before completing and submitting this request. This form works best if you save it to your computer before completing.

## Section A – Requester information

NAME OF REQUESTING PARTY		REPRESENTING (GROUP OR ORGANIZATION)		REQUEST DATE
MAILING ADDRESS		CITY	STATE	ZIP
PHONE	EMAIL ADDRESS			

## Section B – Record(s) requested

DESCRIPTION OF RECORDS REQUESTED
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## Section C – Receiving record(s), certification

CERTIFICATION	PREFERRED METHOD OF RECEIPT	PICK UP LOCATION (IF APPLICABLE)
AREA(S) OF ODOT CONTACTED REGARDING THIS REQUEST		

Submitting this form:

Submit by email: Save completed form. Attach completed form to an email addressed to [ODOTPRR@odot.state.or.us](mailto:ODOTPRR@odot.state.or.us)

Submit by fax: (503) 986-4025

Submit in person or by mail: ODOT Records Officer, Business Services Branch MS 51, 355 Capitol St. NE, Salem, OR 97301

To request a public-interest waiver or reduction of fees, complete the Fee Waiver or Reduction Request below.

ODOT OFFICE USE ONLY				
ESTIMATE AMOUNT	DATE ESTIMATE PROVIDED	DATE AUTHORIZED TO PROCEED	REQUEST WITHDRAWN	REQUEST COMPLETED
ACTUAL COST	PAYMENT RECEIVED	MISCELLANEOUS BILLING DATE	COMPLETED BY	COMPLETED BY
COMMENTS				