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**CITY OF KETCHUM  
PUBLIC RECORDS REQUEST FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Description of information requested (Please be specific: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Under penalty of perjury, I hereby certify that I will not be using, nor will I allow to be used in any form or manner, the records, documents or lists obtained from the City of Ketchum as a mailing or telephone number list for any purpose, including but not limited to, soliciting, market research, etc., in accordance with Idaho Code §74.120.

\_\_\_\_\_  
Signature

City Employee(s) Processing Request: \_\_\_\_\_

Date Completed: \_\_\_\_\_ Fees Collected & Receipt #: \_\_\_\_\_

Notes regarding request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Note: City of Ketchum Resolution #16-008 established a copying fee schedule for public records requests. Payment of the applicable charges shall be made prior to the commencement of research or copying based upon the City Clerk's estimated cost for meeting the public records request, unless prior arrangements have been made.

Pursuant to the Idaho Public Records Act (Idaho Code §9-337 to §9-348), the City of Ketchum has three (3) working days to fill this request. However, if more than three (3) working days are needed to process this request, the requestor shall be notified, with the documents or response following within ten (10) days.