

SENECA COUNTY PARK DISTRICT 3362 S. TOWNSHIP ROAD 151, TIFFIN OH 44883 419-447-8091

Public Records Request Form

Seneca County Park District is dedicated to providing you timely responses to all public records requests. Your request is not required to be in writing, nor is it required that your name or intended use of the requested records is disclosed. The information contained on this form is solely intended to enhance our ability to accurately respond to your request in a timely and reasonable manner.

Requestor's Name:		Today's Date:	
Address:			
City:	State:	Zip:	
Phone:	Email:		
Information Requested: Please be specific. R	ecords sought must be identif	ied with sufficient clarity in order to allow	
SCPD to identify, retrieve and review the records. Generally, this includes the type of record, the dates of the record you			
are seeking, and the subject of the record. St	aff at the SCPD office are avail	able to assist by advising you of the manner	
in which records are kept. Please Print.			
Type of Record(s) Requested:			
Relevant Dates of Record:			
Subject / Topic:			
Further Description of Record Request:			
Format of Information Requested:			
\square Copied/Mailed (provide mailing address o	r pick up) <i>Cost will include pri</i>	ce per page of B&W/color and any postage	
☐ Emailed (provide email) <i>No Cost</i>			
\square Copied to flash drive (provided by request	or) <i>No Cost</i>		
□ Other, explain		Total Cost:	