

**Compliance Office**

400 Yesler Way, Suite 300  
Seattle, WA 98104-2615

**206-205-5975** Fax 206-205-3945  
TTY Relay: 711

www.kingcounty.gov/health



**REQUEST FOR PUBLIC RECORDS**

Please provide the information below either electronically or manually.

**Electronic Request:** Complete this form electronically and save it to your computer. Email it to: [Compliance.Health@kingcounty.gov](mailto:Compliance.Health@kingcounty.gov) as an attachment.

**Manual Request:** Print out the form and complete the information. Mail the form to: Public Health Disclosure Requests, Compliance Office, 400 Yesler Way, Suite 300, Seattle, WA 98104.

Date: \_\_\_\_\_

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

Doing Business As: \_\_\_\_\_

Requestor Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Requestor Email: \_\_\_\_\_

Describe specifically what records you are requesting so that we can respond to your request accurately. List the types of documents needed such as; correspondence, violations, inspections, septic system design, etc. Please identify any pertinent location to assist in identifying records. Environmental health requests associated with a location should have both a parcel number and street address referenced.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time period for requested records (Ex: May 2006 - May 2007): \_\_\_\_\_

**Please include your mailing address** because many documents are only available hard copy and must be sent via US mail.

Available in alternate format upon request pursuant to ADA.