

Request for Disclosure of Sudden Valley Records

Note to Requester: This form is not to be used to request information. It is to be used to request inspection of those types of records which are required by law to be made available to members. Records Requests are subject to SVCA's Records Request Policy (the "Records Policy"), RCW 64.38.045 and RCW 24.03.215.

Instructions:

- 1. Complete this form in its entirety and deliver to the General Manager in person or via e-mail at office@suddenvalley.com. Incomplete forms will be rejected.
- 2. SVCA charges for records requests as allowed by law and in the amounts set forth in the Records Policy. Requesters are required to pay an advance deposit for the expected charges. Failure to pay the deposit will result in closure of the request without further action.

Name of	Requester:
Division:	Lot:
Mailing A	ddress:
Physical	Address:
Email Ad	dress:
Phone No	umber:
Records	Being Requested:
Verification	on: By signing below, the undersigned hereby certifies that (please check all boxes that apply):
	This request to review Records is made in good faith and for a proper purpose.
	The undersigned will agree to reasonable restrictions required by the Board on the use or distribut of Records.
	This request is directly connected with a proper purpose.
	The requested Records will not be used for a commercial purpose.
Cianatura	DATE:
Signature	

	Below Thi	s Line Sta	aff Use	
Date of Request: Date Copies Made: Date Provided: Date Item(s) Return Records are for: Private Use	ed:		Request Made: in Person by Mail by E-mail Attach Request	
	harged:ed:			
Charges				
Amount Due:	\$			
Less Deposit:	\$			
Balance (or refund):	\$			
Forms Released by (print):			ure:	
Date:				
Approved by (Print):			ure:	
Date:				

SVCA: 4 Clubhouse Circle, Bellingham, WA 98229 Ph: (360) 734-6430 **Fax**: (360) 734-1915