North Unit Irrigation District

Public Records Request

ORS 192.314 and ORS 192.324 grants each person the right to inspect the records of a public body unless the records are exempt from disclosure. District staff will respond in writing within five (5) business days of receiving this request.

Requestor Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Description of Record(s):

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Other information that could narrow the search, such as dates and names:

_____

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_____

_____

___ I would like to inspect the records.

___ I would like copies of records.

Signature of Requestor: _____

Submit this form to North Unit Irrigation District by email, mail or fax to:

Email: nuid@northunitid.com

Mail: North Unit Irrigation District
2024 NW Beech Street
Madras, OR 97741

Fax: 541-475-3905