

## **REQUEST FOR ACCESS TO COURT FILES OR RECORDS**

### **WHAT DOCUMENTS WOULD YOU LIKE?**

Complaint/Citation/Information

Electronic Docket

No Contact Order

Judgment/Sentence Form

Plea Agreement

Pre-trial Diversion Agreement

Other (specify) \_\_\_\_\_

**Copy fees:**            **100 pages or less**    **No Charge**  
                              **101 or more pages**   **\$.15 per page (charge includes first 100 pgs)**

**DO YOU NEED CERTIFIED COPIES? YES / NO (circle one)**

**Copy fee is \$5.00 for the first page and \$1.00 for each additional page per document**

Payment may be made by check, cash, money order or credit/debit card (convenience fee will be added).

After fees have been paid, copies may be picked up at the court during regular business hours from 8 a.m. to 5 p.m.

If you cannot pick up your documents, please indicate your preferred delivery method (circle one): Mail / Fax / E-mail

**If documents are not claimed within 30 days, reapplication and prepayment will be required including previous fee(s)**

**RECORD/DOCUMENT INFORMATION** *\*Must have one of the following combinations: 1) Name and date of birth of a party (the defendant in a criminal matter); 2) Name and Washington driver's license number of a party (the defendant in a criminal matter); or 3) Case number. Other helpful information is the type of charge and date of violation.*

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

Date of birth: \_\_\_\_\_

Defendant's Driver's License Number / State: \_\_\_\_\_

Case Number(s): \_\_\_\_\_ Type of Charge (or) Date of violation: \_\_\_\_\_

### **REQUESTOR'S INFORMATION**

Name: \_\_\_\_\_ Agency (if applicable): \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

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

E-mail Address \_\_\_\_\_

**I agree that this information will not be used for commercial purposes and that it will be protected from commercial use.**

**Signature of requestor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Internal Use Only: Date Requestor Advised:** \_\_\_\_\_ **Amount Due: \$** \_\_\_\_\_