



INITIAL REQUEST FORM

REQUEST TO INSPECT AND/OR COPY RECORDS OF THE RHODE ISLAND DEPARTMENT OF TRANSPORTATION

Please fax to (401) 222-4226 or mail:

Office of Legal Counsel
Rhode Island Department of Transportation
Room 250
Two Capitol Hill
Providence, RI 02903

DATE: _____

NAME OF PERSON MAKING REQUEST (OPTIONAL): _____

ADDRESS OF PERSON MAKING REQUEST (OPTIONAL): _____

TELEPHONE NUMBER (OPTIONAL): _____

TITLE OF DOCUMENT(S) REQUESTED TO BE INSPECTED OR COPIED:

GENERAL DESCRIPTION OF SUBJECT MATTER OF DOCUMENT(S):

NAME & TITLE OF PERSON AT RIDOT HAVING CUSTODY OF REQUESTED DOCUMENT(S),
IF KNOWN: _____

REQUEST IS MADE TO: INSPECT ONLY OBTAIN COPIES

Copies of any documents are fifteen cents (\$.15) or the actual reproduction cost for paper larger than 8 1/2" by 14", plus an hourly charge of fifteen dollars (\$15.00) per hour for searching and copying, unless otherwise provided by rules & regulations promulgated by RIDOT.

Note: If the Department determines that the requested records are exempt from disclosure in accordance with the Access to Public Records Act, the Department reserves its right to claim such exemption.