LEMHI COUNTY PUBLIC RECORDS REQUEST



206 Courthouse Drive Salmon, Idaho 83467

exempt information redacted is attached.

Name	Date
Mailing Address	
City/State/Zip Code	
Phone	
·	e in writing. Please make your request specific and concise, s this will expedite the processing of your request.
Please note—advance payment of a fee may be require than one hundred (100) copies of paper records will be	ed when it is estimated that more than two (2) hours of labor or more required to fulfill the request.
Requested Documents which may be identified a	as follows:
•	ed will not be used as a mailing or telephone list as prohibited the recorded images will not be sold and are only for the
Signature of Requesting Party	
☐ Request Granted	
·	
	nount
☐ Advance Payment Required: Amount	Received Date
☐ Unable to Respond because	
\square Notice of Denial: The requested record is exempt fr	rom disclosure.
·	tially denied. Certain information has been determined to be exempted to the requested record. A copy of the requested record with the requested record.

Phone: (208) 756-2815, Ext. 1738 Fax: (208) 756-8424

Email: clerk@lemhicountyidaho.org

If your request has been denied or partially denied, an attorney for Lemhi County has reviewed the request, or Lemhi County has had the opportunity to consult with an attorney regarding the request for examination or copying of a record and has chosen not to do so.

If you wish to appeal the denial or partial denial of your request for public records, you may do so pursuant to the provisions of Idaho Code §74-115, which requires that a petition be filed in the District Court within 180 days from the date of the mailing of the notice of denial or partial denial.