



**ACCESS TO PUBLIC RECORDS ACT
PUBLIC RECORDS REQUEST FORM**

**Mail this form to Records Request, Providence Housing Authority, 100 Broad St, Providence, RI 02903 or email it to records@provhousing.org.
You may also drop it off at 100 Broad Street at the PHA Administrative Offices (there is a drop box outside for contactless drop off).**

Date _____ **Request Number** _____

Name (Optional) _____ **Email (Optional)** _____

Address (Optional) _____ **Telephone (Optional)** _____

Requested Records _____

If after review of your request the PHA determines that the requested records are exempt from disclosure for a reason set forth in the APRA, the PHA reserves its right to claim such exemption.
The Act permits the PHA to charge reasonable costs to provide public records. The cost per copied page of written documents provided to the public shall not exceed fifteen cents (\$.15) per page for business-page-size documents. Hourly costs for search and retrieval shall not exceed fifteen dollars (\$15.00) per hour. The first hour expended regarding new requests is at no cost.

OFFICE USE ONLY

Request taken by: _____ **Request Number** _____

Date: _____ **Time** _____

Records to be available on _____ **Mail** _____ **Pick Up** _____

Records provided _____

Costs: _____ **Copies** _____ **Search and Retrieval** _____