

# **DEPARTMENT OF LABOR AND TRAINING**

## **LEGAL DIVISION**

1511 Pontiac Ave.  
Cranston, RI 02903  
401 462-8890  
Fax: 401 462-8884

### **PUBLIC RECORDS REQUEST PROCEDURE**

The Department of Labor and Training has instituted the following procedure to help the public obtain public records pursuant to RIGL §§ 38-2-1 et seq.

1. To reach us by telephone call the above-cited telephone number and speak to a staff attorney.
2. The regular business hours of the Department are 8:30 AM to 4:00 PM.
3. The Department may ask you the reason for your request as its regular course of Business; however, you are not required to provide the reason you seek the information, and your right to access public records will not depend upon providing reasons.
4. In order that you are provided with the public records you seek in an expeditious manner, the Department asks that you complete the Public Record Request Form, which may be obtained upon request and is included on page two of this document.
5. There are times when the public records you seek are not available at the time of your request. Please be advised that the Access to Public Records Act allows a public body ten (10) business days to respond, which can be extended an additional twenty (20) business days for "good cause." The Department appreciates your understanding and patience.
6. If you believe that you have been denied access to public records, you have the right to file a review petition with the Department of Attorney General. If you are still not satisfied, you may file a lawsuit in Superior Court. The Department of Attorney General's Guide to Open Government may be obtained on its website <http://www.riag.ri.gov/Forms/APRArequestguidelines.pdf>.
7. This Department is committed to providing any individual with public records in an expeditious and courteous manner.

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

Date: \_\_\_\_\_ Request Number: \_\_\_\_\_

Request to Inspect Records:

Request to Copy Records:

Requestor's Retrieval Method: Pick Up:

Mail:

Requestor's Name: \_\_\_\_\_

Requestor's Address: \_\_\_\_\_

Requestor's Telephone: \_\_\_\_\_

Requestor's Email: \_\_\_\_\_

Description of Requested Records:

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**OFFICE USE ONLY**

Request taken by: \_\_\_\_\_ Request Number \_\_\_\_\_

Date of Request: \_\_\_\_\_ Time of Request: \_\_\_\_\_

Date Records to be Available on: \_\_\_\_\_ By Mail: \_\_\_\_\_ By Pick Up: \_\_\_\_\_

Records provided: \_\_\_\_\_

Total Costs: \_\_\_\_\_ # of Copies: \_\_\_\_\_ Search and Retrieval Time: \_\_\_\_\_

**The Department reserves the right to deny your request, if the requested records are exempt from disclosure pursuant to RIGL § 38-2-2(4)(i)(A) – (Y).**