

380 - Citizen Action Requests

1.0 Purpose

The District has the responsibility for maintaining an aquatic recreational facility. The general public and District employees often provide the first report of a deficiency or concern related to the facility. Generally, when this communication occurs, regardless of its source, the District is considered to have received "notice". When there is no documentation, record or tracking system to show when the District received notice and what actions were taken, a potential liability could occur and the safety of the users.

2.0 Policy

The District needs to respond to reported concerns/deficiencies within a reasonable time and in an appropriate manner. The Executive Director or his designee is responsible for setting up a tracking system capable of being used to ensure an adequate response and documents a history of actions taken.

2.1 Documentation Form

The District utilizes of a standardized form so that the information obtained is consistent (see Attachment A)

2.2 Tracking

The Employee who receives the action request shall fill out the form as completely as possible. The form will then be given to the Executive Director or his designee for logging and tracking. See (Attachment B).

2.3 Retention

The District will maintain the Action Requests per the Washington State Local Government Retention Schedule, the retention schedule for type of information listed above is at least three (3) Years.

Attachment A

Citizen Action Request Form

FORWARD TO:

	Supervisor: Lessons		Supervisor: Lifeguards		Executive Director
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COPIES TO: (1) Clerk of the Board (2) Citizen Communications File

Date of Occurrence: _____ Time of Occurrence: _____ (if applicable)

Date/Time Report Received: _____ Received By: _____

Name of Person Reporting: _____

Address of Person Reporting _____

Phone Number of Person Reporting: (Work) _____ (Home) _____

SPECIFIC LOCATION OF OCCURRENCE: _____

Name(s) of Person(s) involved:
Phone Number

Address

Describe the Condition/Problem in Detail (Attach supplemental documentation if appropriate)

Action Taken (To be Completed by Responding Official)

What corrective measures were taken or assistance given? If none, explain.

COMPLETED BY: _____ **DATE:** _____

