



Request for Reproduction of Copyrighted Materials

NOTE: THIS FORM MUST BE PROPERLY COMPLETED FOR THE CITY OF PORTLAND TO ACCEPT
YOUR COPY REQUEST

Name Rajendra Sofi

Mailing Address 3405 NW ORCHARD AVE # 209

City CORVALLIS State OR Zip Code 97330

Day Phone 541-740-9055 FAX _____ email sofi@oregonstate.edu

I hereby request copies of the following material including
drawings; specifications; calculations; details and notes dated: _____
(date(s) on drawings, etc.)

for the project: REV-01 C011-108687
(name of project)

and/or located at: 1104 NW 15TH AVE
3228 SE 21ST AVE
(street address)

TRIM Record #'s _____

Please check all that apply:

- ☐ I have been granted copying privileges by the copyright owner or architect see Attachment A;
- ☒ I am not required to obtain a copyright release from the copyright owner or architect because:
- ☒ I intend to use the copies made for "...purposes such as criticism, comment, news reporting, teaching, scholarship, or research..." as allowed by fair use doctrine. I understand I cannot use these copies for commercial gain.
- ☐ The materials were created prior to March 1, 1989 and there is no copyright notice on the plans.
- ☐ The materials were created prior to 1923 and therefore in the public domain.
- ☐ None of the above apply because my request does not contain any materials protected by copyright law

I agree to defend, indemnify and hold harmless the City of Portland, its officers, employees and agents from
any and all claims, actions, damages and liabilities arising or related to any copyright violation claim(s)
made against the City as a result of the reproduction of any materials identified in this copy request.

[Signature]
(Initial)

By signing below, I verify that I have read and understand all terms set forth herein:

Signature [Signature] Date Dec-22-2016