



Address, City, State, Zipcode, Phone Number

FREEDOM OF INFORMATION REQUEST (FOIA) FORM

Name: _____

Company: _____

Address: _____

Telephone: _____ E-mail: _____

I would like to: Inspect records Obtain a Certified Copy Via Email Via Mail

Requested Information: (PLEASE IDENTIFY SPECIFIC PERSONS, PROJECT NAMES, LOCATIONS, ADDRESSES, DATES, DOCUMENTS AND OTHER INFORMATION IN DETAIL.)

Submit this request to the Village of (name, address, city, state, zipcode). The Village will respond to your request within _____ working days unless the Village invokes one or more of the seven (7) reasons for an extension of time provided for in Section 3(d) of the Freedom of Information Act.

Will the requested information be used for commercial purposes? Yes No

Date: _____ Signature: _____

*****FOR OFFICE USE ONLY*****

Date Received: _____

Routed to: _____

Fees: _____

Disposition: _____