

FREEDOM OF INFORMATION ACT (FOIA) REQUEST FORM

Fill out the form below completely.

Records Will Not Be Released Until Full Payment of Costs Are Received.

Under the Freedom of Information Act, Public Act 442 of 1976, I am requesting the following information.

Date of Request:		
Name		
Phone		
Email		
Delivery Method (Pick up, mail, email, or appointment.)		
Address		
City/State/Zip		
Information Requested: Describe the public record(s) as specifically as possible. If you are not sufficiently specific, it may be impossible to identify the records you request and your request may be denied. You may be contacted for clarification.		
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You will receive a response within five business days, counted from the day after your request is received. Electronically transmitted request are deemed received the date after they are sent. The Township may, within five business days, issue a notice extending the request for not more the ten business days. If the estimated costs exceed \$50, you may be required to provide a deposit before your request will be fulfilled. You will be charged allowable fees under FOIA unless you provide documentation showing that you are receiving public assistance or are otherwise unable to pay due to indigence.

FOR OFFICE USE ONLY

FOIA#: DATE RECEIVED: RECEIVED BY: RECEIVED VIA: DUE TO REQUESTOR:

10 DAY EXTENSION REQUESTED: DUE DATE: DEPOSIT RECEIVED: DATE:

BALANCE DUE:

HAYES TOWNSHIP 9195 MAJOR DOUGLAS SLOAN ROAD CHARLEVOIX, MICHIGAN 49720 231.547.6961 WWW.HAYESTOWNSHIPMI.GOV





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