

FREEDOM OF INFORMATION REQUEST FORM*

TO: OSHTEMO CHARTER TOWNSHIP

REQUESTED BY:

(Name) **

(Address) **

(Telephone) **

(Email)

DESCRIPTION OF PUBLIC RECORDS REQUESTED: _____

NATURE OF REQUEST [check one below]:

_____ Please provide a copy of the requested public records. Paper Records Digital Records

_____ Please provide a certified copy of the requested public records.

_____ Please allow me an opportunity to inspect the requested public records prior to copying. I understand that the Township may require me to schedule an appointment for this inspection.

PAYMENT [check one below]:

_____ I understand that the Township will charge me a fee for providing a copy of a public record, including the cost of copying, mailing, searching, examining, reviewing, separating and deleting exempt information. I understand that a deposit of one-half of the anticipated fee (if the fee is estimated to exceed \$50) will be required.

_____ Attached is an Affidavit of Indigency. Please furnish me the requested public records without charge for the first \$20.00 of the required fee. I agree that the Township may respond to my request by the _____ day of _____, 20__.

I acknowledge this request will be processed in compliance with the Policy & Procedure Guide located at Oshtemo.org under FOIA Request.

(Date)

(Signature)

*It is the policy of Oshtemo Charter Township that a written Freedom of Information Act Request is required except when the request involves the following types of records (1) current property record cards; (2) current zoning maps; (3) current zoning and general ordinances; (4) minutes for any meeting within the last 12 months.

** REQUIRED