



THE VILLAGE OF
SOUTH CHICAGO HEIGHTS
REQUEST FOR PUBLIC RECORDS UNDER THE FREEDOM OF INFORMATION ACT

DATE REQUESTED: _____

REQUESTERS Name: _____

Address: _____

City/State/Zip (required): _____

Request Submitted By: E-Mail U.S. Mail Fax In Person

DESCRIPTION OF REQUESTED PUBLIC RECORD(S): **Provide as much specific detail as possible so the Village can identify the information that you are seeking. You may attach additional pages, if necessary.*

Please indicate if you wish to inspect the public records or to have a paper copy of the records. *There is no charge for the first 50 pages; \$0.15 per page thereafter. An e-mail address is required for electronic response and fees maybe applicable for recording medium.*

In Person Inspection Paper Copy Electronic Certified Copy- \$1.00 fee per copy

E-Mail Address: _____

Is this request for a Commercial Purpose? YES or NO

(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c)).

Are you requesting a fee waiver? YES or NO

(If you are requesting that the public body waive any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety and welfare or legal rights of the general public. 5 ILCS 140/6(c)).

⇒ **FOR OFFICE USE ONLY**

Date & Time Received

Received By

Date & Time – Mailed

Date & Time - Picked-up

Date & Time E-Mail Sent