



OFFICE USE ONLY:
Date Received Stamp

REQUEST FOR PUBLIC RECORDS

REQUESTER: _____

ADDRESS: _____

PHONE #: _____ E-MAIL: _____

DESCRIPTION OF REQUESTED RECORD:

Please indicate if records are **for a commercial purpose**: Yes No

Please indicate if you wish to inspect the above-captioned records or would like copies¹. Please further indicate if you would like the information electronically, if available.

Inspection Copy E-mail (if available) Accident Report (\$5.00/report)

TO BE COMPLETED BY THE VILLAGE: Initial Response to Requester Due Date: _____

Request Received by (Employee/Department):	Date	Request Forwarded to (Employee Department):	Date

Please indicate if the request was approved or denied. Approved Denied

SUMMARY OF RESPONSE (attach all correspondence and copies):

Name and Title of Responding Employee: _____

Date Returned to FOIA Officer _____ Date of Response by FOIA Officer _____

Manner of Response _____ Receipt Acknowledged _____

¹The Village of Streamwood complies with all State laws regarding copyrights, provision of records, and copying costs. For physical copies greater than 50 pages of black and white, letter or legal sized copies, a charge of \$0.15 per page may apply.