**Section 901.APPENDIX A Freedom of Information Request Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Agency | | | | | City | | | | INSTRUCTIONS:  Requestor should fill out the request portion (the top half) and sign the Requestor's Signature block. Send copies 1 and 2 to the Agency. Keep the 3rd copy for references. Send no money at this time. Unless notified otherwise the Agency's response for APPROVED, DENIED or DEFERRED will be sent back within 7 working days after receipt of the form. | | | |
| Address | | | | | | | | |  | | | |
| Requestor's Name (or business name if applicable) | | | | | | | | | Date of Request | | Phone Number | |
| Street Address | | | | | | | | | CERTIFICATION REQUESTED  YES  NO | | | |
|  | | | | | | | | | Requestor's Signature | | | |
| City | | | | State | | Zip | | |  | | | |
| DESCRIPTION OF RECORDS REQUESTED: | | | | | | | | | | | | |
|  | | | | | | | | |  | | | |
| REQUESTING COPIES | | | | | | | | | TO INSPECT RECORDS | | | |
| AGENCY RESPONSE (REQUESTOR DOES NOT FILL IN BELOW THIS LINE) | | | | | | | | | | | | |
| APPROVED |  | | | | | | | | | | | |
|  |  | | The documents requested are enclosed. | | | | | | | | | |
|  |  | | The documents will be made available upon payment of copying costs $\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
|  |  | | You may inspect the record at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
|  |  | | on the date of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. | | | | | | | | | |
|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| DENIED |  | | The request creates an undue burden on the public body in accordance with Section 3(f) of the Freedom of Information Act, and we are unable to negotiate a more reasonable request. | | | | | | | | | |
|  |  | | The materials requested are exempt under Section 7\_\_\_\_ of the Freedom of Information Act for the following reasons: | | | | | | | | | |
|  |  | | | | | | | | | | | |
|  | INDIVIDUAL(S) THAT DETERMINED REQUEST TO BE DENIED | | | | | | | | | RIGHT TO APPEAL | | |
|  |  |  | | | | | |  | | If desired, submit the attached APPEAL form (No. 2) along with copies of the original REQUEST and reasons for appeal to: | | |
|  |  | | | | | | | | |  | | |
|  |  |  | | | | | |  | |  | | |
|  |  | | | | | | | | |  | | |
| DEFERRED | Request delayed, for the following reasons (in accordance with 3(d) of the DOIA):  You will be notified by the date of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as to action taken on your request. | | | | | | | | | | | |
| The information required by this form is MANDATORY in order to comply with P.A. 83-1013. Failure to so provide may result in this form not being processed. This form is approved by the Form  Management Center. | | | | | | | FOIA Officer | | | | | Date of Reply |

IL-001 – 0005 (6/84)

LEGEND FOR REQUESTOR: 1st copy (white) – send to Agency; 2nd copy (yellow) – send to Agency; 3rd copy (pink) – Requestor's copy