



OFFICE USE ONLY:
Date Received Stamp

REQUEST FOR PUBLIC RECORDS

REQUESTOR: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____ EMAIL: _____

DESCRIPTION OF REQUESTED RECORD: _____

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

Please indicate if you wish to inspect the above-captioned records or would like copies¹ and if the documents must be certified. Please further Indicate if you would like the information electronically (if available).

Inspection Copy Certified Electronic (if available)

Accident Report (\$5.00/report)

TO BE COMPLETED BY THE VILLAGE:

Initial Response to Requestor Due Date: _____

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

Please indicate if the requested 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 _____

¹ The Village of Streamwood complies with all State laws regarding copyrights, provision of records, and copying costs.