

City of Hamtramck, Michigan
Request for Public Records
Freedom of Information Act (FOIA) Request Form
 *** PLEASE PRINT CLEARLY ***

Name/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Telephone #: _____

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| Please describe the record(s) as specifically as possible. (The City will not respond to vague, unclear or overly broad requests) |
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I have requested the records pursuant to FOIA and understand that the City must respond to my request within (5) business days after receiving it, except that the City may extend the period for an additional (10) business days. A written request made by facsimile or electronic mail is not received by a public body until (1) one business day after the electronic transmission is made. I further understand the cost of copies shall be \$.10 per page in addition to labor costs when it is necessary to research, collect and/or produce the records. If it is determined the cost of the request will exceed \$50, a deposit may be required.

Signature: _____ Date: _____

Return completed form to: FOIA Coordinator
 City of Hamtramck
 3401 Evaline,
 Hamtramck, MI 48212

Or Via Email:
 Rfaraj@HamtramckCity.com

***** FOR CITY OF HAMTRAMCK USE ONLY*****

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|--|-----------------|
| Labor: Hours () X Rate (\$): _____ | \$ _____ |
| (Equal to hours x rate of lowest clerk capable of performing required labor) | |
| Photocopies: \$.10 Per Page X Number of Pages (): _____ | \$ _____ |
| Postage (if applicable): _____ | \$ _____ |
| Total: _____ | \$ _____ |
| LESS DEPOSIT (if any): _____ | \$ _____ |
| Balance Due: _____ | \$ _____ |