

**CITY OF FERNDALE, MICHIGAN
FREEDOM OF INFORMATION ACT (FOIA) REQUEST FORM**

PLEASE EMAIL COMPLETED FORM TO: CITYCLERKSOFFICE@FERNDALE-MI.COM

REQUEST TO: Inspect record Receive copy Inspect & receive a copy of pertinent records

DELIVERY METHOD (*upon payment of balance due*): Pick up in person Email Mail to address below

DESCRIPTION OF PUBLIC RECORD: All requests must describe the desired documents adequately and in sufficient detail for staff to identify and locate the information.

I understand that there may be a cost for copies and/or labor cost for searching, copying and/or separating material and mailing costs.

Date

Print Name

Phone Number

Company

Alternate Phone Number

Street Address

Email Address: *Costs may be reduced if requestor provides an email address for electronic response.*

City, State, Zip Code

Requestor's Signature: _____

Date Emailed to Department(s) of Record			
___/___/___ Community & Economic Development	___/___/___ DPW	___/___/___ Finance	
___/___/___ City Manager's Office	___/___/___ Police	___/___/___ Fire	___/___/___ Other: _____
<i>For Office Use Only</i>			

Date Completed Request due to Clerk's Office _____