ALLEN PARK HOUSING COMMISSION FREEDOM OF INFORMATION REQUEST FORM

Paguastad by:		
Requested by:	(Name)	
	(Company Name)	
	(company rume)	
	(Address)	(City, State, Zip)
	(Telephone)	(email address)
		the Freedom of Information Act: (Print Clearly) Request – General Requests cannot be fulfilled)
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(If you need additional	anasa plassa santinus s	n the back of this form)
By signing this docum providing a copy of reviewing, separating	nent, I understand that t a public record, inclu	he Allen Park Housing Commission may charge me a fee for ading the cost of copying, mailing, searching, examining, formation. The fee for processing this request is pursuant to
following receipt of re	equest. The Public Bo sion for an additional t	to my request within five (5) business days, starting the day dy must grant or deny all or a portion of my request, and/or en (10) business days. By signing this form I realize that this
information will be us third parties in accord	ed to process your FOI dance with the provision	by 5 USC552(a) and Act 442 of 1976 as amended. The A request. The information on this form may be disclosed to on of 5 USC 552(b). Completion of this form is voluntary; equested may preclude the processing of your FOIA request.
In place of these deadlines, I agree to allow the public body a reasonable time to process my request.		
Signature of Requestor:		
	(Executive	Director's Office use Only)
Date and Time Receiv	ved:	
Date and Time requestor was contacted regarding FOIA pick-up:		