

Village of South Jacksonville Freedom of Information Request Form

FOIA # _____

Date Received: _____ FOIA Start Date: _____ Date Due: _____

Date Extension Requested: _____ New Due Date: _____

-Office Use Only-

The Freedom of Information Act is an act in relation to access to public records. The Act allows us **five (5) business day, excluding weekends and holidays**, to comply with your request. If your request is denied, you will be notified by mail of the reason for denial. If your request is approved, you will be notified when your information is available. The first fifty (50) pages are free for black and white copies. There is a .15 cent fee for each additional copied page of information. The Village requires payment of fees prior to the copying of voluminous requests. Otherwise, fees are payable upon receipt of documents.

To assist a search pertaining to your request and help us determine your right to access, please complete the information requested below.

Your Name (Please Print) Street Address

City/State/Zip code Telephone Number

Information Requested

Police Incident Report Number (if known): _____

Incident Type: _____ Incident Location: _____

Is the request for commercial purpose? YES ___ NO ___

*****Commercial purpose means the use of any part of a public record or records, or information derived from public records, in any form, for sale, resale, or solicitation or advertisement for sales or service.

PERSON INVOLVED IN INCIDENT: IF APPLICABLE, INCLUDE YOUR NAME

Name: _____ DOB _____ Sex: M ___ F ___
Address: _____

Name: _____ DOB _____ Sex: M ___ F ___
Address: _____

Name: _____ DOB _____ Sex: M ___ F ___
Address: _____

Other Information: _____

Your Signature Date: _____