



CONTROL NO. _____

REQUEST FOR PUBLIC RECORDS

 FOIA SUBPOENA

DEPARTMENT OF LAW
16901 MICHIGAN AVENUE, STE. 14
DEARBORN, MICHIGAN 48126 Ph# 313-943-2035 FAX# 313.943.2469

EMAIL COMPLETED REQUEST TO: FOIA@DEARBORN.GOV

****NOTE: THIS IS A TWO-SIDED DOCUMENT****

 YOUR NAME/ORGANIZATION _____
 ADDRESS _____
 CITY, STATE, ZIP CODE _____
 DAYTIME TELEPHONE NUMBER _____
 DESCRIBE THE PUBLIC RECORDS AS SPECIFICALLY AS POSSIBLE _____

I have requested a copy of records pursuant to FOIA. I understand that the City must respond to my request within five (5) business days after receiving it, except that the City may extend the period for an additional ten (10) business days. I hereby agree and consent to extending the time for the City to respond. Additionally, I understand that I will have to pay for the materials before they will be released to me.

A copy of the City of Dearborn's FOIA Procedures and Guidelines, along with its Written Public Summary, is available at <https://cityofdearborn.org/documents/city-departments/law-department>.

SIGNATURE _____ DATE _____

When the requested documents have been compiled, I would like:

the documents **EMAILED** to me. Send amount due (indicated on reverse side), along with a copy of this form, to: City of Dearborn, Treasury Division, 16901 Michigan Ave., Ste. 21, Dearborn, Michigan 48126 and the records will be emailed to you. LIST CONTROL NUMBER ON CHECK.
Email address: _____

OR

the documents **MAILED** to me. Send amount due (indicated on reverse side), along with a copy of this form, to: City of Dearborn, Treasury Division, 16901 Michigan Ave., Ste. 21, Dearborn, Michigan 48126 and records will be mailed to you. LIST CONTROL NUMBER ON CHECK.

OR

to **PICK UP** the documents. Pay amount due (indicated on reverse side) and pick up at Dearborn Administrative Center (DAC), Treasury Division, 16901 Michigan Ave., Ste. 21. Payment by credit/debit card (Visa is not accepted) M-F, 8am - 5pm. Service fees apply. Must have FOIA Control No. for credit/debit card transaction.

--over--

FOR CITY OF DEARBORN USE ONLY

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|---|-----------------|
| LABOR (15 min increments _____ @ \$ _____/hr) | \$ _____ |
| COPYING (\$.10 per page/two-sided; number of pages _____) | \$ _____ |
| VIDEO/AUDIO (\$30.00 ea)..... | \$ _____ |
| TOTAL | \$ _____ |
| LESS DEPOSIT (if any) | \$ _____ |
| BALANCE DUE | \$ _____ |

A SEARCH OF CITY RECORDS HAS REVEALED NO RECORDS THAT MEET THE CRITERIA SET FORTH IN YOUR REQUEST.

THE REQUESTED DOCUMENTS ARE AVAILABLE AT NO CHARGE ON THE CITY OF DEARBORN WEBSITE <http://cityofdearborn.org/documents>

Request processed by: _____ *Date:* _____