Date: _____

DOWNERS GROVE TOWNSHIP
FREEDOM OF INFORMATION REQUEST FORM

Name:	
Street:	**Home:**
City:	**Work:**
State: **Zip:**	**Mobile:**

Form of Information: **Inspection Only** ❒ **Certified Copy** ❒ **Copy** ❒

(circle one please)
Do you want copies of the documents? Yes or No

(circle one please)
What type of copy? Electronic or Paper

If you want Electronic copies, in what format? _____

Is this request for a Commercial Purpose? Yes or No ***(circle one please)***

(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by the public body. 5 ILCS 140.3.1(c)).

Are you requesting a fee waiver? Yes or No ***(circle one please)***

(If you are requesting that the public body waive any fees for copying the documents, you must attach a statement of the purpose of the request, and whether the principal purpose of the request is to access or disseminate information regarding the health, safety and welfare or legal rights of the general public. 5 ILCS 140/6(c)).

Records Requested: ***(Please be specific as possible)***

Purpose of the Request:

The Township of Downers Grove will respond to a request for public records within 5 working days after receipt of this form and 21 days to reply for commercial enterprise requests. If your request is denied, you may file an appeal. Appeals should be addressed to the Public Access Counselor at the Illinois Attorney General's Office. Costing of copying information requested will be due upon delivery.

Requested by: _____

FOR OFFICE USE ONLY

Received By	Date Received	Date of Response	Action Taken	Request Denied

Remarks:

Number of Pages	Number of Copies	Date Payment Received	Amount of Payment