Request Form

Township: Keep original and provide copies of both sides of each sheet, along with Public Summary, to requestor at no charge.

Echo Township, Antrim County P.O. Box 549 Central Lake, MI 49622 Phone: (231) 544-2516

Note: Requestors are not required to use this form. The Township may complete one for recordkeeping if not used.

## FOIA Request for Public Records Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.

Request No.:	Date Received:	Date delivered to junk/spa	_ Email; Fax; Other Electronic Method am folder: pam folder:
(Please Print or Type)			
Name			Phone
Firm/Organization			Fax
Street			Email
City		State	Zip
Request for: C	opy; Certified copy; F	Record inspection; Subscri	ption to record issued on regular basis
	_ Will pick up; Will make own a provided by the Township	copies onsite; Mail to addre	ess above; Email to address above;
<b>Note:</b> The Township is technological capabilit	·	n a digital format or on digital me	dia if the Township does not already have the
Describe the public r	ecord(s) as specifically as pos	sible. You may use this form or a	ttach additional sheets:

Consent to Non-Statutory Extension of Township's Response Time I have requested a copy of records or a subscription to records or the opportunity to inspect records, purs Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq. I understand that the Township m request within five (5) business days after receiving it, and that response may include taking a 10-busine However, I hereby agree and stipulate to extend the Township's response time for this request until:	ust respond to this
(month, day,	year).
	(Complete both sides)
Requestor's Signature:	Date
Records Located on Website	
If the Township directly or indirectly administers or maintains an official internet presence, any public records available public on that internet site at the time the request is made are exempt from any labor charges to redact (separate exempt information).	
If the FOIA coordinator knows or has reason to know that all or a portion of the requested information is available on Township must notify the requestor in its written response that all or a portion of the requested information is availab written response, to the degree practicable in the specific instance, must include a specific webpage address where t information is available. On the detailed cost itemization form, the Township must separate the requested public recoon its website from those that are not available on the website and must inform the requestor of the additional charge the public records that are available on its website.	le on its website. The he requested rds that are available
If the Township has included the website address for a record in its written response to the requestor and the request stipulates that the public record be provided to him or her in a paper format or other form, including digital media, the provide the public records in the specified format (if the Township has the technological capability) but may use a friggreater than the 50%, not to exceed the actual costs of providing the information in the specified format.  Request for Copies/Duplication of Records on Township Website I hereby stipulate that, even if some or all of the records are located on a Township website, I am requesting that the copies of those records on the website and deliver them to me in the format I have requested above. I understand tha apply.	Township must nge benefit multiplier Fownship make
Requestor's Signature:	Date
Overtime Labor Costs	l
Overtime wages shall not be included in the calculation of labor costs unless overtime is specifically stipulated by the noted on the detailed cost itemization form.	e requestor and clearly
Consent to Overtime Labor Costs I hereby agree and stipulate to the Township using overtime wages in calculating the following labor costs as ite	mizad in the following
categories:	inized in the lonowing
1 Labor to copy/duplicate 2 Labor to locate 3a Labor to redact 3b Contract labor to redact copy/duplicate records already on Township's website	6b Labor to
Requestor's Signature	Date

Request for Discount: Indigence A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.0 request by an individual who is entitled to information under this act and who:	0 of the fee for each				
1) Submits an affidavit stating that the individual is indigent and receiving specific public assistance, OR					
If not receiving public assistance, stating facts showing inability to pay the cost because of indigence.					
If a requestor is ineligible for the discount, the public body shall inform the requestor specifically of the reason for inelique body's written response. An individual is ineligible for this fee reduction if ANY of the following apply:	gibility in the public				
(i) The individual has previously received discounted copies of public records from the same public body twice during t	hat calendar year,				
(ii) The individual requests the information in conjunction with outside parties who are offering or providing payment or to the individual to make the request. A public body may require a statement by the requestor in the affidavit that the rec made in conjunction with outside parties in exchange for payment or other remuneration.					
Office Use: Affidavit Received Eligible for Discount Ineligible for Discount					
I am submitting an affidavit and requesting that I receive the discount for indigence for this FOIA request:	Date:				
Requestor's Signature:					
Request for Discount: Nonprofit Organization  A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 request by a nonprofit organization formally designated by the state to carry out activities under subtitle C of the Developisabilities Assistance and Bill of Rights Act of 2000 and the Protection and Advocacy for Individuals with Mental Illnes meets ALL of the following requirements:  (i) Is made directly on behalf of the organization or its clients.  (ii) Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Menta PA 258, MCL 330.1931.  (iii) Is accompanied by documentation of its designation by the state, if requested by the Township.  Office Use: Documentation of State Designation Received Eligible for Discount	opmental s Act, if the request				
Ineligible for Discount					
I stipulate that I am a designated agent for the nonprofit organization making this FOIA request and that this request is made directly on behalf of the organization or its clients and is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Mental Health Code, 1974 PA 258, MCL 330.1931:	Date:				
Requestor's Signature:					

(Created by Michigan Townships Association, April 2015)