

Office Use Only

VILLAGE OF SOMONAUK
131 S. Depot, P.O. Box 218
Somonauk, IL, IL 60552
815-498-3500 Fax: 815-498-3569

FREEDOM OF INFORMATION REQUEST FORM

Date Request Received _____ **Due Date** _____ **Date Fulfilled:** _____

Date of Request: _____

Requestor's Name (or business name, if applicable):

Requestor's Address:

Street: _____

City: _____

Zip: _____

Requestor's Phone Number(s):

Description of records requested (please be as detailed as possible): *Please state whether public records are to be certified.*

_____ **Copy** _____ **Inspect Only** _____ **Certify (circle one)** **Yes/No**

Is this request for a Commercial Purpose? _____ Yes _____ No

The Village of Somonauk will respond in five (5) working days.

Requestor:

FOIA Officer:

Copying Charge: Black and white copies (letter or Legal)-No charge for 1st 50 pages- \$.15 per page thereafter.

Certification: \$1.00

Maps: \$5.00

UDO: \$30.00 each

Mailing: Cost of Postage

Village of Somonauk

Freedom of Information Act Policy

The Village Response (Requester does not fill in below this line). The Village may use this form in response to a request or may prepare a letter which includes the required information.

A P P R O V E D	()	The Documents you requested are enclosed.
	()	The Documents will be made available upon payment of coping costs. \$_____.
	()	You may inspect records at _____ on _____.
D E N I E D	()	<p>The request creates an undue burden on the public body in accordance with Section 3 (g) of <u>the Freedom of Information Act, and we are unable to negotiate a more reasonable request.</u></p> <p>The Materials requested are exempt under Section 7 of the Freedom of Information Act for the following reasons:</p> <p>() _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>You have the right to seek review of the denial by Public Access Counselor in the Illinois Attorney General’s Office, as well as the right to seek judicial review by filling a court case.</p> <p>Public Access Bureau 500 S. 2nd St. Springfield, Il. 62706 217-558-0486 publicaccess@atg.state.il.us</p>
	()	<p>Request delayed, for the following reasons (in accordance with 3(e) of the FOIA): _____</p> <p>You will be notified by the date of _____ as to the action taken on your request.</p>
		<p>FOIA Officer: _____ Date of Reply: _____</p>

