



# Village of East Hazel Crest Police Department

708-798-2186 • FAX 708-798-2173

## **Freedom of Information Act (FOIA) Request**

(Complying with Public Act 96-542, effective January 1, 2010)

TO: East Hazel Crest Police FOIA Officer

Date: \_\_\_\_\_

I hereby request permission to inspect or receive copies of the following public records: *(Please describe **in detail** the documents/record requested to the best of your ability to include case number, names, dates, times, location, etc.).* **Requests for documents will be returned by email.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this request for commercial purposes? Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
Name of Requester *(Please print)*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
**Clearly Legible Email Address**

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

### **For Office Use Only**

\_\_\_\_\_  
Date Received Village of East Hazel Crest

\_\_\_\_\_  
Received By (Name of Village Staff Member)

\_\_\_\_\_  
Delivery Mode (Personal Delivery, U.S. Mail, Fax, E-mail)

\_\_\_\_\_  
Date Received by FOIA Officer

\_\_\_\_\_  
Reply by Date

\_\_\_\_\_  
Extension Needed? (yes or no)

\_\_\_\_\_  
Adjusted Reply by Date

\_\_\_\_\_  
Date of Response to Request

\_\_\_\_\_  
Replied By (Name of Village Staff Member)