FREEDOM OF INFORMATION REQUEST
Request for disclosure of Public Information

Date of Request: ____________________

Requested By: Name: ____________________________________ (please print)

Address, City, State, Zip: ______________________________________________________

E-mail: ________________________________________________________________

Phone Number: _________________________________

Nature of request and detailed description of public records sought:

____________________________________________________________________________________________

____________________________________________________________________________________________

Do you want to be notified by mail or email regarding fees and/or a notice of an extension?

Request response time: The Township has 5 business days to respond to your request. We may extend the initial 5 business day time for responding by an additional 10 business days when we deem it necessary.

DeWitt Charter Township procedures for providing requested information:
Requests that are picked up in person require the requestor to provide a driver’s license/photo identification, which will be copied and signed by the requestor. If no photo identification is provided, the requested information will be sent via first class mail, once the payment (if charges apply) has been received.

Signature of person making request: ________________________________

Signature of person accepting request: ________________________________

Date request was received: ________________________________

Revised 05/21/2018