Village of Johnsburg
Freedom of Information Act (FOIA) Request Form

Requestor’s Name: ___________________________ Date: ____________
Address: ____________________________________ City: __________ State: _______ Zip Code: _______
Phone: ______________ Fax: ___________________ Email: ________________________________

Public records requested (be specific):
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Please indicate how you would prefer to receive the requested records:
Mail: ___ Email: ___ Fax: ___ Pick-up: ___ Inspection Only: ___

Please indicate the purpose of your request: Personal: ___ Commercial: ___

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)). 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)).

FOIA requests must be in writing and are accepted in person, mail or email to either the Village Police Department or Village Hall.

Requestor’s Signature: __________________________________________

For Office Use Only
Request received by: __________________________________________
Date response due: __________________ Extension Requested: ___ Yes ___ No
Date response provided: __________________ Response sent by: ___ Mail ___ Email ___ Fax

Copying fees (no charge for first 50 letter or legal sized pages)
$____ $0.15 per page over 50 pages
$____ Additional fees for oversized pages, color copies, electronic reproduction $____ Total fees due

Request reviewed by: __________________________________________

Note: additional comments may be written on reverse side of form.