

## FREEDOM OF INFORMATION ACT REQUEST

**TO:** City of Hazel Park, 111 E. Nine Mile Road, Hazel Park, MI 48030  
City Clerk's Office

I, \_\_\_\_\_, hereby make request upon the City of  
(NAME)

Hazel Park, by and through it's \_\_\_\_\_ Department,  
(NAME OF DEPARTMENT)

to make copies of the following described documents:

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I understand that the City need not immediately respond to my request, and that it is entitled to respond within five (5) business days after the day that this request is dated and could extend that response for an additional ten (10) business days under unusual circumstances. I also understand that I may be required to pay a fee for the cost of labor, search, examination, review, deletion and separation of exempt from non-exempt information, and if copies are made, the cost of duplication of the requested records. Also, I understand that the City may request a good faith deposit.

Dated: \_\_\_\_\_

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Phone Number)

Rec'd by City: \_\_\_\_\_

Initials: \_\_\_\_\_

Deposit: \_\_\_\_\_