Hawes Township

FOIA Request for Public RecordsMichigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.

Request No.:	Date Received:		
(Please Print or Type)		Date <u>delivered</u> to junk/spam folder: Date <u>discovered</u> in junk/spam folder:	
Name		Phone	
Firm/Organization		Fax	
Street		Email	
City		State Zip	
Request for: Co	py Certified copy F	Record inspection	d on regular basis
_	Will pick up □ Will make own dia provided by the township:	•	nail to address above
Note: The township is not technological capability t		digital format or on digital media if the township does n	ot already have the
Describe the public rec	cord(s) as specifically as possib	le. You may use this form or attach additional sheets:	
Information Act, Public Act days after receiving it, and	records or a subscription to records of 442 of 1976, MCL 15.231, et seq. I un	ry Extension of Township's Response Time or the opportunity to inspect records, pursuant to the Michigan derstand that the township must respond to this request with D-business day extension. However, I hereby agree and stipu (month, day, year).	hin five (5) business
Requestor's Signature			Date
	ndirectly administers or maintains an o	ords Located on Website official internet presence, any public records available to the graph abor charges to redact (separate exempt information from	

information).						
If the FOIA coordinator knows or has reason to know that all or a portion of the requested information is available on its website, the township must notify the requestor in its written response that all or a portion of the requested information is available on its website. The written response, to the degree practicable in the specific instance, must include a specific webpage address where the requested information is available. On the detailed cost itemization form, the township must separate the requested public records that are available on its website from those that are not available on the website and must inform the requestor of the additional charge to receive copies of the public records that are available on its website.						
If the township has included the website address for a record in its written response to the requestor and the requestor thereafter spublic record be provided to him or her in a paper format or other form, including digital media, the township must provide the publispecified format (if the township has the technological capability) but may use a fringe benefit multiplier greater than the 50%, not to actual costs of providing the information in the specified format. Request for Copies/Duplication of Records on Township Website	ic records in the o exceed the					
I hereby stipulate that, even if some or all of the records are located on a township website, I am requesting that the township make copies of those records on the website and deliver them to me in the format I have requested above. I understand that some FOIA fees may apply.						
Requestor's Signature	Date					
Overtime Labor Costs						
Overtime wages shall not be included in the calculation of labor costs unless overtime is specifically stipulated by the requestor at the detailed cost itemization form.	nd clearly noted on					
Consent to Overtime Labor Costs						
I hereby agree and stipulate to the township using overtime wages in calculating the following labor costs as itemized in the following 1. □ Labor to copy/duplicate 2. □ Labor to locate 3a. □ Labor to redact 3b. □ Contract labor to 6b. □ Labor to copy/duplicate records already on township's website						
Requestor's Signature	Date					
Request for Discount: Indigence A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 of the fee for each request by an individual who is entitled to information under this act and who: 1) Submits an affidavit stating that the individual is indigent and receiving specific public assistance, OR 2) If not receiving public assistance, stating facts showing inability to pay the cost because of indigence. If a requestor is ineligible for the discount, the public body shall inform the requestor specifically of the reason for ineligibility in the public body's written response. An individual is ineligible for this fee reduction if ANY of the following apply: (i) The individual has previously received discounted copies of public records from the same public body twice during that calendar year, (ii) The individual requests the information in conjunction with outside parties who are offering or providing payment or other remuneration to the individual to make the request. A public body may require a statement by the requestor in the affidavit that the request is not being made in conjunction with outside parties in exchange for payment or other remuneration. Office Use: Affidavit Received Eligible for Discount Ineligible for Discount						
I am submitting an affidavit and requesting that I receive the discount for indigence for this FOIA request:	Date:					
Requestor's Signature:						
Request for Discount: Nonprofit Organization A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 of the fee for each request by a nonprofit organization formally designated by the state to carry out activities under subtitle C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 and the Protection and Advocacy for Individuals with Mental Illness Act, if the request meets ALL of the following requirements: (i) Is made directly on behalf of the organization or its clients. (ii) Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Mental Health Code, 1974 PA 258, MCL 330.1931. (iii) Is accompanied by documentation of its designation by the state, if requested by the township.						
Office Use: ☐ Documentation of State Designation Received ☐ Eligible for Discount ☐ Ineligible	e for Discount					
I stipulate that I am a designated agent for the nonprofit organization making this FOIA request and that this request is made directly on behalf of the organization or its clients and is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Mental Health Code, 1974 PA 258, MCL 330.1931: Requestor's Signature:	Date:					