Request Form

Hartland Township, Livingston County

2655 Clark Rd., Hartland, MI 48353
ATTENTION: CLERK'S OFFICE
Phone: (810) 632-7498 Fax (810) 632-1033

FOIA Request for Public Records

Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq*.

Requester: *(Please Print or Type)*

Name		Phone
Firm/Organization		Fax
Street		EMail
City	State	Zip

Request for: ☐ Copy ☐ Certified copy ☐ Record inspection ☐ Subscription to record issued on regular basis

Delivery Method: ☐ Will pick up ☐ Will make own copies onsite ☐ Mail to address above ☐ Email to address above
☐ Deliver on digital media provided by the township: _____

Note: *The township is not required to provide records in a digital format or on digital media if the township does not already have the technological capability to do so.*

Describe the public record(s) as specifically as possible. You may use this form or attach additional sheets**:**

Consent to Non-Statutory Extension of Township's Response Time

I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq*. I understand that the township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree and stipulate to extend the township's response time for this request until: _____ (*month, day, year*).

Requester Name (Print or Type)	**Requestor's Signature**	**Date**

For Township Use Only:
Request Number: _____ Date Received: _____ Received By: _____
Received By: ☐ Mail ☐ Email ☐ Fax ☐ Other: _____
Date Delivered to junk/spam folder: _____ Date discovered in junk/spam folder: _____

Date of Response: _____ ☐ Granted ☐ Denied (in Full) ☐ (Denied Partial)