



# Village of South Jacksonville

## Village of South Jacksonville Freedom of Information Request Form

FOIA # \_\_\_\_\_

Date Received: \_\_\_\_\_ FOIA Start Date: \_\_\_\_\_ Date Due: \_\_\_\_\_

Date Extension Requested: \_\_\_\_\_ New Date Due: \_\_\_\_\_

-Office Use Only-

Freedom of Information Act is an act in relation to access to public records. The Act allows us **five (5) business days, excluding weekends and holidays**, to comply with your request. If your request is denied, you will be notified by mail of the reason for denial. If your request is approved, you will be notified when your information is available. The first fifty (50) pages are free for black and white copies. There is a \$0.15 fee for each additional copied page of information. The Village Requires payment of fees prior to the copying of voluminous requests. Otherwise, fees are payable upon receipt of documents.

To assist a search pertaining to your request and help us determine your right to access, please complete the information requested below:

\_\_\_\_\_  
Name (Please Print) Street Address

\_\_\_\_\_  
City/State/Zip Code Telephone Number

### Information Requested

Police Incident Report Number (if known): \_\_\_\_\_

Incident Type: \_\_\_\_\_ Incident Location: \_\_\_\_\_

Is the request for commercial purposes? YES \_\_\_\_\_ NO \_\_\_\_\_

\*\*\* Commercial purpose means the use of any part of a public record or records, or information derived from public records, in any form, for sale, resale, or solicitation or advertisement for sales or service. \*\*\*

### PERSON INVOLVED IN INCIDENT: IF APPLICABLE, INCLUDE YOUR NAME

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

Other Information: \_\_\_\_\_

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date