

SOUTH ELGIN & COUNTRYSIDE FIRE PROTECTION DISTRICT

1090 W. Spring Street, South Elgin, IL 60177

Attn: Fire Chief

847-741-2141 · Fax: 847-741-2184

FREEDOM OF INFORMATION ACT REQUEST

Requestor's Name, Firm or Other Affiliation

Requestor's Street Address

City, State, Zip Code

Telephone (Including area code)

Requestor's Signature and Date of Request

Business Organization or Status:

___ Private, For-Profit, Commercial

___ Private, Not-For-Profit

___ Media

___ Student, Researcher

___ Industry Association

___ Attorney, Litigants

___ Unit of Local, Nat'l Government

___ Other State Agencies

FOR OFFICIAL USE ONLY

DESCRIPTION OF INFORMATION REQUESTED:

REASON FOR REQUEST:

APPROVED:

___ Requested information is enclosed.

___ Information may be inspected at this office by calling for an appointment.

DENIED:

___ Request creates an undue burden on a public body in accordance with §3(f) of the Illinois Freedom of Information Act, and this office was not able to negotiate a more reasonable request.

___ Information requested are exempt under §7 _____ of the Illinois Freedom of Information Act for the Following Reasons: _____.

DEFERRED:

___ In accordance with §3(d) of the Illinois Freedom of Information Act, the request is delayed for the following reasons: _____.

You will be notified by _____, 201____, as to the action taken on the request.

RIGHT OF APPEAL: If desired, submit a copy of the denied request along with a written statement of reasons in support as your appeal of the forgoing decision to Diane Cornelissen, District President, 1090 Spring Street, South Elgin, IL 60177.

FOIA Officer

Date of Reply

Recipient's Acknowledgement of Information Receipt:

Printed Name

Date

Signature