



GROSSE ILE TOWNSHIP

9601 Groh Road
Grosse Ile MI 48138
Monday-Friday, 8am-5pm
CLERK'S OFFICE
(734) 676-4422 x234/241
(734) 692-9682 fax
www.grosseile.com

Freedom of Information Act Request

Name _____
Business _____
Address _____
City/State _____
Phone _____ Fax Number _____
E-Mail _____
Signature _____ Date _____

Method of Delivery Pick Up Priority Mail Regular Mail Fax

FOR OFFICE USE ONLY
Request received by _____
Date received _____
Request forwarded to _____
Date completed _____
F.O.I.A completed by _____
Applicant notified by _____
Date _____
 Call Email Fax

Detailed information requested (Specify type of record) — Please continue on back of form or include separate sheet if necessary.

Request for Copy Certified Copy Record Inspection

PLEASE CHECK THE BOX NEXT TO THE INFORMATION NEEDED

- DVD of the following meetings _____ \$20.00
- Audit Report/Annual Report/Budget Actual Postage (In Advance)
- Municipal Code & Zoning Ordinances Book \$50.00 Plus Postage if Mailed
- Supplements Actual Postage in Advance
- Master Plan \$30.00 Pick Up, \$35.00 Mailed
- Photo Copy of Large Format Blue Print Actual/Cost Time and Materials
- Zoning Maps (color) \$18.00

CHARGES

Voter Information Available Under F.O.I.A. (voter name & address only & voting history)

- All Current Registered Voters Any Format (50% Deposit) \$75.00 CD Paper Email
- All Permanent Absentee Mailing List (50% Deposit) \$25.00 CD Paper Email
- Individual Voting History _____ \$0.50 per record X _____ # of Record

Specific Election Date(s) Requested _____

- CD Paper Email \$25.00 per election
- Labels \$50.00 per election
- Daily Absentee Voters (In Advance) Pick Up Mailed Email \$30.00

Labor charge consists of time to compile, review, copy & assemble at lowest clerical rate as determined by the F.O.I.A. Coordinator.

Labor (billed in 1/4 hour increments) \$27.12/hour x _____ # of Hours

FOR OFFICE USE ONLY

		TOTAL
<input type="checkbox"/> Copies-Letter	Cost/Pg _____ # of Pgs _____	_____
<input type="checkbox"/> Copies-Legal	Cost/Pg _____ # of Pgs _____	_____

Copy Costs	
DEPOSIT AMOUNT (if required)	
Sub-Total	
Postage Costs (if any)	
TOTAL CHARGE FOR F.O.I.A.	