

Village of Elk Grove Village  
 Office of the Village Clerk  
 901 Wellington Avenue  
 Elk Grove Village, IL 60007  
 Ph. 847/357-4042 Fax 847/357-4008



(Office Use Only)
Request No. _____
Date Received _____
Due Date _____
Routed to: CD <input type="checkbox"/> Finance <input type="checkbox"/> Health <input type="checkbox"/> HR <input type="checkbox"/>
PW <input type="checkbox"/> Police <input type="checkbox"/> Fire <input type="checkbox"/> VMO <input type="checkbox"/> Attorney <input type="checkbox"/> VCO <input type="checkbox"/>

**REQUEST FOR PRODUCTION OF RECORDS**

All requests for public records must be made in writing, preferably upon a Village of Elk Grove Freedom of Information Request Form. The Village will accept any legible written request, provided that such written request is clearly stated and contains the name, address and telephone number of the requestor. Requests may be hand-delivered, faxed, mailed or emailed (foia@elkgrove.org).

Requestor Name: \_\_\_\_\_  
 (Please Print)

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

Phone (Day time): \_\_\_\_\_ Email: \_\_\_\_\_

Detailed Description of Requested Record(s):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Is this information going to be used for commercial purposes? Yes  No

In accordance with the law, the Village of Elk Grove Village will respond to all non-commercial requests upon five (5) working days of receipt. Responses to commercial requests will be provided upon twenty-one (21) working days of receipt. (Working day as defined by Village Resolution No. 63-09.)

<b><i>I have received access to records requested.</i></b>	
_____	_____
Signature	Date

**ACTION TAKEN BY VILLAGE WITH REGARDS TO THIS REQUEST**

- Complied with Request
- Extension of time is required (Please see the attached letter of explanation)
- Sent to Public Access Counselor for review Date sent: \_\_\_/\_\_\_/\_\_\_
- Partial Compliance (Certain material contained in the original request has been redacted or omitted because the material is exempt from disclosure under the act. Please see the attached letter of explanation)
- Request Denied (Please see the attached letter of explanation)

Representative of Village who is responsible for decision relative to this request \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

First fifty (50) pages of standard black & white copies are provided at no charge.	
Black & White copies after first 50 pages	\$0.15/page
Audio Tape/Compact Disk/DVD	\$5.00/unit
Copy from Microfilm	\$1.00/page
Certification	\$1.00/document
Accident Reports	\$5.00/report
Amount Due \$	_____