



**The Village of South Barrington**  
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**For Office Use Only**  
Date Received: \_\_\_\_\_  
FOIA #: \_\_\_\_\_

## FREEDOM OF INFORMATION ACT (FOIA) REQUEST FORM

**Requestor's Name:** \_\_\_\_\_

(First & Last Name)

**Requestor's Company:** \_\_\_\_\_

**Requestor's Address:** \_\_\_\_\_

(Number, Street, City, State, Zip Code)

**Requestor's Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

(Must provide email address if requesting electronic records)

### Records Requested

*Be specific with type of records being requested, include address of property and dates. No assumptions will be made when processing.*

**How would you like to receive the requested information:**  Electronic  Paper Copy

**I am the owner of the property for which the records are being requested:**  Yes  No

**Records being requested are for what purpose:**  Non-Commercial  Commercial

### PROCESSING TIMELINES

**Non-Commercial Requests:** non-exempt information will receive a response within (5) business days after receipt of the request, unless additional time is required, as allowed by FOIA.

**Commercial Requests:** non-exempt requests will receive a response within (21) days. It is a violation for a person to knowingly obtain public records without disclosing that it is for a commercial purpose.

For more information on FOIA requests please visit our website at: <https://southbarrington.org/foia-requests/>

### I Would Like To (Check All That Apply):

- Inspect these records at an arranged time with the FOIA Officer
- Receive copies of these records at a cost of \$0.15 cents per page for pages in excess of 50 pages  
*(Additional fees will be charged for copy service for oversized records and color pages)*
- Obtain certified copies of the records at a cost of \$1.00 per document

**Requestor's Signature**

**Date**