



Office of the City Clerk

REQUEST FOR COPIES OF PUBLIC RECORDS UNDER THE ILLINOIS FREEDOM OF INFORMATION ACT

NAME: _____

ADDRESS: _____

TELEPHONE NO.: _____

PERSON OR ENTITY REPRESENTED: _____

EMAIL ADDRESS: _____

PUBLIC RECORD REQUESTED (BE SPECIFIC: for example, if requesting a building permit, specify the address of the property and approximate date of issuance and please be more specific than "all documents about..."):

Signature

Date

Unless otherwise notified, your request for public records will be complied with within five (5) working days after its receipt.