

**Township:** Keep original and provide copy of both sides, along with Public Summary, to requestor at no charge.

Addison Township, Oakland County  
1440 Rochester Rd.  
Leonard, MI. 48367  
Phone: 248.628.3317

**Request Form**  
*Note: Requestors are not required to use this form. The Township may complete one for recordkeeping if not used.*

## FOIA Request for Public Records

**Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.**

**Request #:** \_\_\_\_\_ **Date Received:** \_\_\_\_\_ **Check if received via:**  Email  Fax  Other Electronic Method  
**Date delivered to junk/spam folder:** \_\_\_\_\_  
*(Please Print or Type)* **Date discovered in junk/spam folder:** \_\_\_\_\_

Name	Phone	
Street	Email	
City	State	Zip
Firm/Corporation	Phone	
Street	Fax or Email	
City	State	Zip

A request from a person other than an individual who qualifies as indigent under section 4(2)(a), must include the requesting person's complete name, address, and contact information, and, if the request is made by a person other than an individual, the complete name, address, and contact information of the person's agent who is an individual. An address must be written in compliance with United States Postal Service addressing standards. Contact information must include a valid telephone number or electronic mail address.

**Request for:**     Copy     Certified copy     Record inspection     Subscription to record issued on regular basis

**Delivery Method:**     Will pick up     Will make own copies onsite     Mail to address above     Email to address above  
 Deliver on digital media provided by the Township: \_\_\_\_\_

**Note:** *The township is not required to provide records in a digital format or on digital media if the township does not already have the technological capability to do so.*

**Describe the public record(s) as specifically as possible. You may use this form or attach additional sheets:**


**Consent to Non-Statutory Extension of Township's Response Time**

I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq. I understand that the Township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree and stipulate to extend the Township's response time for this request until: \_\_\_\_\_ (month, day, year).

<b>Requestor's Signature</b>	<b>Date</b>
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*(Complete both sides)*

