Request Form

County: Keep original and provide copies of both sides of each sheet, along with Public Summary, to requestor at no charge.

Cheboygan County 870 South Main Street Cheboygan, Michigan 49721 *Phone:* (231) 627-8855

Note: Requestors are not required to use this form.
The County 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 No.:	Date Received:	Check if received via:	Email;	Fax; Other Electronic	
Date delivered to junk/sp	pam folder:		Met		
(Please Print or Type)		Date discovered in junk/spam folder:			
Name			Phone	. *	
Firm/Organization			Fax		
Street			Email		
City		State	Zip	A 100 W	
		Record inspection; Subs	scription to record	issued on	
technological capability to	required to provide records in o do so.	a digital format or on digital me			
Describe the public rec	ord(s) as specifically as pos	ssible. You may use this form o	r attach additiona	r sneets:	
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Consent to Non-Statutory Extension of County's Response Time	
I have requested a copy of records or a subscription to records or the opportunity to inspect records, purs Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq. I understand that the County mure request within five (5) business days after receiving it, and that response may include taking a 10-business than the county must be subscripted in the county must be	est respond to this ess day extension.
However, I hereby agree and stipulate to extend the County's response time for this request until:	(month,
day,	year).
	(Complete both sides)
Requestor's Signature:	Date
Records Located on Website	
If the County directly or indirectly administers or maintains an official internet presence, any public records available on that internet site at the time the request is made are exempt from any labor charges to redact (separate exempt internet information).	
If the FOIA coordinator knows or has reason to know that all or a portion of the requested information is available on County must notify the requestor in its written response that all or a portion of the requested information is available written response, to the degree practicable in the specific instance, must include a specific webpage address where t information is available. On the detailed cost itemization form, the County must separate the requested public records its website from those that are not available on the website and must inform the requestor of the additional charge to public records that are available on its website.	on its website. The he requested s that are available on
If the County has included the website address for a record in its written response to the requestor and the requestor that the public record be provided to him or her in a paper format or other form, including digital media, the County mecords in the specified format (if the County has the technological capability) but may use a fringe benefit multiplier not to exceed the actual costs of providing the information in the specified format. Request for Copies/Duplication of Records on County Website I hereby stipulate that, even if some or all of the records are located on a County website, I am requesting that the Couthose records on the website and deliver them to me in the format I have requested above. I understand that some FO	ust provide the public greater than the 50%, inty make copies of
Requestor's Signature:	Date
Overding Labor Ocata	
Overtime Labor Costs Overtime wages shall not be included in the calculation of labor costs unless overtime is specifically stipulated clearly noted on the detailed cost itemization form.	by the requestor and
Consent to Overtime Labor Costs	
I hereby agree and stipulate to the County using overtime wages in calculating the following labor costs as iten categories:	nized in the following
1 Labor to copy/duplicate 2 Labor to locate 3a Labor to redact 3b Contract labor to redact copy/duplicate records already on County's website	6b Labor to
Requestor's Signature	Data

Request for Discount: Indigence A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 request by an individual who is entitled to information under this act and who:	of the fee for each					
Submits an affidavit stating that the individual is indigent and receiving specific public assistance, OR						
2) If not receiving public assistance, stating facts showing inability to pay the cost because of indigence.						
lf a requestor is ineligible for the discount, the public body shall inform the requestor specifically of the reason for inelig body's written response. An individual is ineligible for this fee reduction if ANY of the following apply:	ibility in the public					
(i) The individual has previously received discounted copies of public records from the same public body twice during the	nat calendar year,					
(ii) The individual requests the information in conjunction with outside parties who are offering or providing payment or to the individual to make the request. A public body may require a statement by the requestor in the affidavit that the rec made in conjunction with outside parties in exchange for payment or other remuneration.	other remuneration quest is not being					
Office Use: Affidavit Received Eligible for Discount Ineligible for Discount						
I am submitting an affidavit and requesting that I receive the discount for indigence for this FOIA request:	Date:					
Requestor's Signature:						
Request for Discount: Nonprofit Organization A public record search must be made and a copy of a public record must be furnished without charge for the first \$20.00 request by a nonprofit organization formally designated by the state to carry out activities under subtitle C of the Develor Disabilities Assistance and Bill of Rights Act of 2000 and the Protection and Advocacy for Individuals with Mental Illness meets ALL of the following requirements: (i) Is made directly on behalf of the organization or its clients. (ii) Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Menta PA 258, MCL 330.1931. (iii) Is accompanied by documentation of its designation by the state, if requested by the County. Office Use: Documentation of State Designation Received Eligible for Discount Ineligible for Discount	opmental s Act, if the request					
I stipulate that I am a designated agent for the nonprofit organization making this FOIA request and that this request is made directly on behalf of the organization or its clients and is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the Mental Health Code, 1974 PA 258, MCL 330.1931:	Date:					
Requestor's Signature:						

(Created by Michigan Townships Association, April 2015)