



City of Gladstone

RETURN FOIA REQUEST TO:
Gladstone City Clerk
Email: kberry@gladstonemi.org
Mail: 1100 Delta Ave
Gladstone MI 49837

FOIA REQUEST FOR PUBLIC RECORDS

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

Date Received _____ Check if received via: ☐ Email ☐ Fax ☐ Mail ☐ Hand Delivered ☐ Spam/Junk Mail Folder

Name		Phone
Firm/Organization		Fax
Street		Email
City	State	Zip Code

Request for: ☐ Electronic Copy ☐ Paper Copy ☐ Record Inspection ☐ Subscription to request on a regular basis

Delivery Method: ☐ Pick Up ☐ Make own copies on site ☐ Mail to address above ☐ Email to address above

☐ Deliver on digital media provided by the city (Note: The city is not required to provide records in digital format or on digital media if the City does not already have the technological capability to do so.)

Describe the public record(s) as specifically as possible. Attach additional page if necessary.

Address, Parcel, Permit, Incident Number:	
Requested Information:	
Consent to Non-Statutory Extension of City's Response Time	
I have requested a copy of records or a subscription to records of the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act of 1976, MCL 15.231, et seq. I understand that the City 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 City's response time for this request until: _____ (month, day, year).	
Requestor's Signature	Date