

Village of Herscher
272 E Second St. Herscher, IL 60941
(815)426-2131

FOIA REQUEST FORM

Date of Request: ____ / ____ / ____

Requester's Name: _____

Address: _____

Contact Information(optional) *Will be used to notify you when documents are ready.*

Phone number: ____ - ____ - ____

Fax number: ____ - ____ - ____

E-Mail: _____

Describe in detail below the public records you are requesting and state whether you wish to inspect and/or copy such records. Also, please state whether such records are to be certified.

The Village of Herscher will respond to the above request within five(5) working days from the above date unless one or more of the seven(7) reasons for an extension of time provided for the Section 3(d) of the Act are invoked by the Village.

Signature of person making request

THIS FORM CANNOT BE USED FOR PRIVACY ACT REQUESTS OR REQUEST FOR INFORMATION ABOUT A THIRD PARTY

(Routing of Request-For Office Use Only)

Department or Office:

___ Clerk ___ Police ___ Engineering ___ Public Works ___ Administration ___ Other(_____)