

Freedom of Information Act Request Form



The Mayor & Council of Middletown
 19 West Green Street
 Middletown, DE 19709
 (302) 378-2711

Pursuant to the Town of Middletown Freedom of Information Act Policy 4.1.1, all requests for public information shall be made in writing by submitting a Town of Middletown Freedom of Information Act Request Form. Please allow ten (10) business days for request to be processed.

APPLICANT INFORMATION:

1. Name: _____

2. Address: _____

City _____ *State* _____ *Zip* _____

3. Date: _____ 4. Time: _____

5. Organization: _____ 6. Title: _____

7. Phone Number: (_____) _____ 8. Fax: (_____) _____

Area Code *Area Code*

INFORMATION REQUESTED:

1. _____

2. _____

3. _____

4. _____

5. _____

By signing below, I agree that the Town of Middletown has provided me with the sufficient opportunity to review the Town of Middletown Freedom of Information Act Policy. I affirm that I have read and I understand the Town of Middletown Freedom of Information Act Policy. I understand that payment is due at the time documents are delivered.

Signature of Requestor *Date*

INTERNAL USE ONLY:

<i>Date Delivered</i>	<i>Copies</i>	<i>Plans</i>	<i>Audio</i>	<i>Zoning C&M</i>	<i>Comp</i>	<i>Charter</i>	<i>Map</i>	<i>SubRegs</i>	<i>Specs</i>
<i>Invoice Number</i>	<i>Amount</i>	<i>Payment Method</i>			<i>Payment Date</i>	<i>Reference Number</i>			
<i>Notes</i>									