

VILLAGE OF NORTH RIVERSIDE FREEDOM OF INFORMATION ACT

Written Request for Inspection or Copying of Public Records

1. Name of person making request _____
2. Address of person making request _____

3. Telephone number of person making request _____
4. Date of request _____

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 public records are to be certified.

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

Signature of Person Making Request _____