

City of Rochester Hills, MI Request for Public Record

CLE-00115-P/ Rev. 032015

I request to (please check one):	Receive a copy of the requested records		Review the requested records
Company Name (if applicable) or Organ	ization (if any)	Daytime Phone	
Requester's Name		Daytime Phone	
Address		Email	
City		State	Zip Code
Specifically describe the public records you request. (If your request is unclear, imprecise, too general, over broad, or inaccurate, it may prevent the city from providing the records you seek.)			
I understand the city will charge a fee for copies of public records in the amount prescribed in Chapter 54 Fees of the Rochester Hills Code of Ordinances, plus labor costs when one quarter (1/4) hour or more of staff time is necessary to search, examine, review, copy, produce, or delete and separate exempt information from the records. If the estimated fee exceeds \$50.00, a deposit of up to one half (1/2) the total fee may be required. Further, I understand that under the law, the city has five (5) business days to respond to this request and may issue a notice extending the time for ten (10) additional business days. A written request made by facsimile, electronic mail, or other electronic transmission is not received by a public body until one (1) business day after the electronic transmission is made.			
Signature of Requester			Date
Office Use Only			
Received by			Date
Extension		Date Comp	oleted