



FREEDOM OF INFORMATION ACT (FOIA) REQUEST FORM

Date of Request: _____ Person Submitting Request: _____ From Department: _____

Mailing Address _____ City _____ State _____ ZIP _____

Telephone Number(s) for Contact: _____

Email for Contact: _____

Description of Public Records Requested - Request Address: _____

Are you requesting for Commercial / Business purpose: Yes No

> I understand that obtaining or using public records for commercial solicitation to any persons in this State is prohibited under South Carolina Code Section 30-2-50, which may result in criminal prosecution.

> I also understand that the Town of Fort Mill has ten (10) days, excluding weekends, and Town Holidays, in which to respond and that I could be charged \$.15 per copied page (standard letter/legal size), plus the hourly rate necessary to recover the labor cost of the personnel responding to the request and any associated mailing fees.

Signature: _____

I would prefer to receive the information via:

MAIL E-MAIL PICK-UP AT TOWN OF FORT MILL PICK-UP AT FORT MILL POLICE DEPT.

RETURN COMPLETED FORM VIA MAIL OR HAND DELIVERY:

Town Administration
200 Tom Hall Street
P.O. Box 159
Fort Mill, SC 29716

Contact for Questions: (803) 547-2116

RECEIVING DEPARTMENT/OFFICE

Person & Dept. Receiving Request: _____ Date Received: _____

Request Received: _____ Via Mail _____ Via Drop-off _____

Response Type: _____ Granted _____ Partial _____

_____ Denied _____ Date Extension Requested _____

Response Sent/Provided Date: _____

Amount of Information Provided: _____ Specific Charges and Payment: _____