

Charter Township of Royal Oak

Request for Disclosure of Township Records

Under the Freedom of Information Act

All information must be TYPED or PRINTED except for written signatures.				
Company Name (if applicable) or Organ	nization (if any)		Daytime Phone	
			Area Code (-
Requester's Name			Evening Phone	
			Area Code () -
Address (Street & Number)			Fax	
			Area Code (-
City State	9	Zip Code	Email	
I wish to examine receive a copy of the	following materials: (Please provide	to dotailed descri	ntions of materials	hoing requested and specify
number of copies needed of each. If yo				
I understand that the Township may take ten (10) additional business days, if necessary, to fill my request due to the diverse locations or large volume of the material. I understand that if it is determined that some or all of the materials which I have requested to review or have copied may not be disclosed, I will receive a written denial including the reason for denial and explaining my right to appeal. I also understand that I may be charged with costs associated with this request, as provided in FOIA.				
Signature of Requester				Date
Please submit completed request to:	Royal Oak Township Clerk's Offi	ce	Phone: (248) 547-	
	21131 Garden Lane, Suite 202		Fax: (248) 547-	
	Ferndale, MI 48220		Email: gturner@r	

FOR OFFICE USE ONLY Received by Copy Charge \$ Approval Mail Charge \$ Forwarded to Labor Charge \$ FOIA Information Due (5 Days) \$ Total 10 Day Extension Letter Sent Deposit (if required) \$ Completion Date Paid \$ Requester Contacted Copies Picked Up On \$