

Telephone (708) 343-4000 Fax (708) 343-4605 Email: foia@melrosepark.org

Requestor's Name: (and company, if app	licable)				
Requestor's Address	s:				
	Street	City	State	Zip	
Requestor's Telepho	one No.:				
Describe in detail th (Use back for more sp	e public records you a pace)	re seeking, and t	he time period	l: 	
	ommercial purpose?				
_	the documents? Please				
•	•				
E-Mail Address:				_	
Mailing Address:				_	
Fees: Inspection (No Charge)	Copy (No Charge for	r first 50 pages)	Certificat (.75 cents		
The Village will respond	ond within five busines	s days of the requ	est date unless	an extension of time	is necessary.
Signature of Reques	tor:				
		(For Office Us	e)		
Date of Request:	Time of Request:			a.m./p.m.	
Request Accepted By				_	
Request Routing:	Village Clerk	Police De			
	Fire Dept Public Works	_	Dept orcement		
	Administration	Other		_	
Updated: 5/21			<del></del>		