

# City of Marquette Heights

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## Freedom of Information Act (FOIA) Request Instructions

Under the Illinois Freedom of Information Act (5 ILCS 140), residents have the right to access public records maintained by the City of Marquette Heights. Below are the steps to submit a FOIA request.

### How to Submit a FOIA Request

You may submit a FOIA request by email, mail or in person. Please include the following information: (a copy of a simple request form is attached for your convenience)

- Your name
- Your contact information (email address, mailing address, or phone number)
- A clear description of the documents or information you are requesting
- Whether you would like to inspect the documents or receive copies

#### Submit via Email:

Send your written request to: [mhoffice@cityofmhgov.org](mailto:mhoffice@cityofmhgov.org)

#### Submit via Mail:

Send your written request to:

FOIA Officer

City of Marquette Heights

715 Lincoln Road

Marquette Heights, IL 61554

### Additional Notes

- The City will respond to your FOIA request within 5 business days, unless an extension is applicable.
- Requests for commercial purposes may take up to 21 business days.
- There may be fees for copies or electronic media, which will be communicated to you in advance.

For questions or more information, please contact the City Clerk's Office at the email or address listed above.

# City of Marquette Heights

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## Freedom of Information Act (FOIA) Request Form

This form is provided to assist individuals in submitting a formal request for public records under the Illinois Freedom of Information Act (5 ILCS 140).

### Requester Information

Full Name: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Records Requested

Please describe in detail the public records you are requesting:

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### Request Format

- ☐ I wish to inspect the records
- ☐ I wish to receive copies
- ☐ Electronic format (if available)

### Purpose of Request

- ☐ This request is for commercial purposes (must be disclosed under 5 ILCS 140/3.1)
- ☐ This request is NOT for commercial purposes

### Requester Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For FOIA Officer Use Only

**FOIA Officer Response**

Date Received: \_\_\_\_\_

Due Date for Response: \_\_\_\_\_

Extension Taken: ☐ Yes ☐ No

If extension taken, new due date: \_\_\_\_\_

Final Disposition:

- ☐ All records provided
- ☐ Partial records provided
- ☐ No records available
- ☐ Request denied

Explanation / Notes:

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**Acknowledgment of Receipt by Requester**

The undersigned acknowledges receipt of the documents or response to this FOIA request.

Signature of Requester: \_\_\_\_\_

Date: \_\_\_\_\_

Submit completed forms to:

Email: [mhoffice@cityofmhgov.org](mailto:mhoffice@cityofmhgov.org)

Mail: FOIA Officer  
City of Marquette Heights  
715 Lincoln Road  
Marquette Heights, IL 61554