St. Clair Township
St. Clair County, Michigan

Joyce Skonieczny, Clerk
1539 S. Bartlett Rd.
St. Clair, MI 48079
Phone (810) 329-9042 Fax (810) 329-1198
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FOIA Request for Public Records

Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq.*

Request to: ☐ Receive copy ☐ Inspect record ☐ Subscribe to record issued on regular basis
Delivery Method (*upon payment of balance due*): ☐ Pick up records in person ☐ Mail to address below

(Please Print or Type)

Name		Phone
Firm/Organization		Fax
Street		Email
City	State	Zip

Describe the public record(s) as specifically as possible:

Requestor's Signature	Date

Consent to Non-Statutory Extension of Township's Response Time

I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, *et seq.* I understand that the township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree to extend the township's response time for this request until _____.

Requestor's Signature	Date

3b. Contracted Labor Cost for Separating Exempt from Non-Exempt: ***(If using in-house employee, use No. 3a instead.)*** This fee is being charged because failure to do so will result in unreasonably high costs to the township because of the nature of the request in this particular instance, specifically:_____ _____ _____ As this township does not employ a person capable of separating exempt from non-exempt information in this particular instance, as determined by the FOIA Coordinator, this is the cost of labor of a **contractor** (i.e.: outside attorney), including necessary review, directly associated with separating and deleting exempt information from nonexempt information. The township will not charge for labor directly associated with redaction if it knows or has reason to know that it previously redacted the record in question and still has the redacted version in its possession. **Name of contracted person or firm:** _____ This shall not be more than the hourly wage of the township's lowest-paid employee capable of separating and deleting exempt from nonexempt information in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in ____**-minute time increments** ***(must be 15-minutes or more)***; all partial time increments must be rounded down. *If the number of minutes is less than 15, there is no charge.* **Hourly Wage Charged: $**_____ **Charge per increment: $**_____ **OR** **Hourly Wage with Fringe Benefit Cost: $**_____ Multiply the hourly wage by the percentage multiplier: ____% *(up to 50% of the hourly wage)* and add to the hourly wage for a total per hour rate. **Charge per increment: $**_____	To figure the number of increments, take the *number of minutes:* ____, *divide by* _____ *-minute increments, and round down to:* ____ *increments. Enter below:* **Number of increments** x _____ =	**Labor Cost** $_____
4. Copying (duplication or printing): Copying costs may be charged if a copy of a public record is requested, or for the necessary copying of a record for inspection (*for example, to allow for blacking out exempt information, to protect old or delicate original records, or because the original record is a digital file or database not available for public inspection*). **No more than the actual cost of a sheet of paper, up to maximum 10 cents per sheet:** **Letter** (8 ½ x 11-inch, single- or double-sided): ___ **cents per sheet** **Legal** (8 ½ x 14-inch,single- or double-sided): ___ **cents per sheet** **No more than the actual cost of a sheet of paper:** **Other paper sizes** (single- or double-sided): ___ **cents per sheet** **Actual and most reasonably economical cost of non-paper physical digital media:** *Circle applicable:* Disc / Tape / Drive / Other Digital Medium **Cost per Item:** _____	**Number of Sheets:** x _____ = x _____ = x _____ = **Number of Items:** x _____ =	**Total Cost** $_____ $_____ $_____ $_____
5. Mailing: The township will charge the actual cost of mailing, if any, for sending records in a reasonably economical and justifiable manner. *The township will not charge more for expedited shipping or insurance unless specifically requested by the requestor. The township *may* charge for the least expensive form of postal delivery confirmation. **Cost of Envelope or Package: $**____ **Postage: $**_____ **per stamp** **$**_____ **per pound** **$**_____ **per package** **Postal Delivery Confirmation: $**_____ ***Expedited Shipping or Insurance as requested: $**_____	**Number of Env./Pkg.:** x _____ = x _____ = x _____ = x _____ = x _____ = x _____ =	**Total Cost** $_____ $_____ $_____ $_____ $_____ $_____
Proof or Affidavit of Indigency Submitted: Yes ____ No____	**Subtract $20.00**	**($_____)**
	Estimated Cost	**$**
Note: If Estimated Cost Exceeds $50.00, a Good Faith Deposit of 50% Required Before Request Will Be Processed	**Date Paid** _____	**50% Deposit:** $_____
Note: Request Will Be Processed, But Balance Must Be Paid Before Copies May Be Picked Up, Delivered or Mailed	**Date Paid:** _____	**Balance Due:** $_____

(January 2015)

St. Clair Township

Freedom of Information Act Request Itemized Cost Worksheet

Pursuant to Section 4 of the Michigan Freedom of Information Act, MCL 15.234, the following costs will be charged for responses to FOIA requests, according to the FOIA Fee Schedule adopted and periodically revised by the township board.		
1. Labor Cost to Locate: This is the cost of labor directly associated with the necessary searching for, locating, and examining public records in conjunction with receiving and fulfilling a granted written request. The township will not charge more than the hourly wage of its lowest-paid employee capable of searching for, locating, and examining the public records in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in ____-**minute time increments** *(i.e.: 15-minutes or more)*; all partial time increments must be rounded down. *If the number of minutes is less than 15, there is no charge.* **Hourly Wage Charged: $**_____ **Charge per increment: $**_____ **OR** **Hourly Wage with Fringe Benefit Cost: $**_____ Multiply the hourly wage by the percentage multiplier: ____% (*up to 50% of the hourly wage*) and add to the hourly wage for a total per hour rate. **Charge per increment: $**_____	To figure the number of increments, take the *number of minutes:* ____, *divide by* _____ *-minute increments, and round down. Enter below:* **Number of increments** x _____ =	**Labor Cost** $_____
2. Labor Cost for Copying: This is the cost of labor directly associated with duplication of publication, including making paper copies, making digital copies, or transferring digital public records to be given to the requestor on non-paper physical media or through the Internet or other electronic means as stipulated by the requestor. This shall not be more than the hourly wage of the township's lowest-paid employee capable of necessary duplication or publication in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in ____-**minute time increments** *(i.e.: 15-minutes or more)*; all partial time increments must be rounded down. *If the number of minutes is less than 15, there is no charge.* **Hourly Wage Charged: $**_____ **Charge per increment: $**_____ **OR** **Hourly Wage with Fringe Benefit Cost: $**_____ Multiply the hourly wage by the percentage multiplier: ____% (*up to 50% of the hourly wage*) and add to the hourly wage for a total per hour rate. **Charge per increment: $**_____	To figure the number of increments, take the *number of minutes:* ____, *divide by* _____ *-minute increments, and round down. Enter below:* **Number of increments** x _____ =	**Labor Cost** $_____
3a. Employee Labor Cost for Separating Exempt from Non-Exempt: ***(If contracted, use No. 3b instead).*** This fee is being charged because failure to do so will result in unreasonably high costs to the township because of the nature of the request in this particular instance, specifically:_____ _____ _____ This is the cost of labor of a **township employee**, including necessary review, directly associated with separating and deleting exempt from nonexempt information. This shall not be more than the hourly wage of the township's lowest-paid employee capable of separating and deleting exempt from nonexempt information in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in ____-**minute time increments** ***(must be 15-minutes or more)***; all partial time increments must be rounded down. *If the number of minutes is less than 15, there is no charge.* **Hourly Wage Charged: $**_____ **Charge per increment: $**_____ **OR** **Hourly Wage with Fringe Benefit Cost: $**_____ Multiply the hourly wage by the percentage multiplier: ____% (*up to 50% of the hourly wage*) and add to the hourly wage for a total per hour rate. **Charge per increment: $**_____	To figure the number of increments, take the *number of minutes:* ____, *divide by* _____ *-minute increments, and round down. Enter below:* **Number of increments** x _____ =	**Labor Cost** $_____