



VILLAGE OF PALATINE FIRE DEPARTMENT

1475 N. Hicks Road
Palatine, IL 60067

FREEDOM OF INFORMATION REQUEST FORM

SARAH MCKILLOP
Palatine Fire Department
Freedom of Information Officer
Phone: (847) 202-6344
Fax: (847) 202-6320
E-mail: smckillop@palatine.il.us

Date of Request _____
(A response to or denial of a request will be
within five (5) working days after its receipt)

(Please Print)

Requestor's Name _____
Last Name _____ First Name _____

Company Name (if applicable) _____

Mailing Address _____
Number & Street _____ City _____ State _____ Zip Code _____

E-mail Address: _____

Cell/Home Phone # _____ Work Phone # _____ Fax # _____

Records sought (be as specific as possible, incl. address, dates/timeframe, type of records, etc.):

Address for Records Sought: _____

I am the owner of the property for which the records are being requested. _____ Yes _____ No

_____ The records sought are for a commercial purpose. (A response to or denial of a commercial request will be within twenty-one (21) working days after its receipt).

Requestor's Signature _____

Date _____

Would you like to receive the requested information electronically (if feasible)? _____ Yes _____ No
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