

FREEDOM OF INFORMATION ACT

Under the Freedom of Information Act, I request the following information:

Development Name/Description: _____

Address/Location: _____

I agree to pay a copy fee of:

Cost per Sheet

Sheet Size & Type

\$ 0.25

8 1/2" x 11"

\$ 0.25

8 1/2" x 14"

\$ 0.50

11" x 17"

\$ 2.50

Record Plats

\$ 3.00

Plans/Drawings/Maps

\$ 10.50

Mylars

Date: _____

Signature: _____

Name: _____

Address: _____

Phone Number: _____