



# BRIGHTON AREA FIRE AUTHORITY

615 W. Grand River Ave.  
Brighton, MI 48116  
o: 810-229-6640 f: 810-229-1619

## Michigan Freedom of Information Act (FOIA) Request for Public Records

Public Act 442 of 1976, Sec. 15.235

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

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

Firm/Organization: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Describe the public record requested as specifically as possible including a specific address. If this request is regarding an incident, please include the incident number or the date of the incident.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of copies requested: \_\_\_\_\_  
Quantity

**Copy Fee: \$10.00 per record/report**

I understand that the FOIA Coordinator may request a good faith deposit from me if the fee authorized by the Freedom of Information Act exceeds fifty (\$50.00) dollars, but shall not exceed one-half (1/2) of the total fee authorized.

Requestor's Initials \_\_\_\_\_

**Consent to Non-Statutory Extension of Response Time**

I have requested a copy of records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.235. I understand that the Fire Authority 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 Authority's response time for this request until \_\_\_\_\_.

Requestor's Initials \_\_\_\_\_

\_\_\_\_\_  
Requestor's Signature

\_\_\_\_\_  
Date