

CITY OF DETROIT

Michigan Freedom of Information Act (FOIA) Request for NON-POLICE RECORDS

Please note that failure to complete certain fields on this form may result in a denial of your request.

1. Today's date: _____
 2. Individual making this request: _____
 3. Street Address: _____
 4. City/State/Zip: _____
 5. Telephone number: _____ Fax number: _____
 6. Your client or insured (optional): _____
 7. Description of the record: _____

 8. Date and time or time period, if applicable: _____
 9. Identify City department or agency: _____
 10. Any other information that will assist the department/agency in locating the requested record:

- Signature: _____

- NOTE:**
- 1) Failure to complete this form may result in a denial of your request.
 - 2) For Buildings, Safety Engineering and Environmental Department record, please identify the address.
 - 3) For contract or RFP/RFQ, please identify contract number or RFP/RFQ number and a description.
 - 4) If the requested record pertains to an individual other than the requestor, a notarized authorization to release the record may be required from the person who is the subject of the request.
 - 5) If the request is too broad, depending on the description of your request, we may deny your request; or request that you submit a deposit payment, prior to searching for the requested record.
 - 6) Medical record requests (e.g., EMS run sheets or billings) must comply with HIPAA and the Michigan Medical Records Access Act.

HAND-DELIVER OR MAIL THIS REQUEST TO:

City of Detroit FOIA Coordinator
City of Detroit Law Department
Coleman A. Young Municipal Center
2 Woodward Avenue, Suite 500
Detroit, Michigan 48226-3437