



**FREEDOM OF INFORMATION ACT
REQUEST FOR INSPECTION OF RECORDS**

DATE: _____ FROM: _____
TO: VILLAGE OF WEST DUNDEE COMPANY: _____
COMMUNITY DEVELOPMENT & FIRE DEPARTMENT ADDRESS: _____
100 CARRINGTON DRIVE _____
WEST DUNDEE, IL 60118 PHONE: _____
PHONE: 847-551-3805 FAX: _____
FAX: 847-551-3814 EMAIL: _____

DESCRIPTION OF REQUESTED RECORDS:

IS THE INFORMATION BEING REQUESTED
FOR COMMERCIAL PURPOSES? YES NO

SIGNATURE OF REQUESTER

FOR OFFICE USE ONLY

NOTES:

DATE RECEIVED

RESPONSE DUE DATE

AUTHORIZATION SIGNATURE

DISTRIBUTION DATE

TOTAL PAGES: _____