

**DU PAGE WATER COMMISSION  
DU PAGE, COOK, AND WILL COUNTIES, ILLINOIS**

**REQUEST FOR PUBLIC RECORDS**

**INSTRUCTIONS AND INFORMATION**

1. In Section I, describe in detail the public records that you wish to inspect or have copied or certified. Use a separate sheet if necessary.

Indicate whether you wish only to inspect the public records at the Commission offices ("I"), to have the public records copied ("C"), or copied and certified ("CR") by checking the appropriate box to the right of each record described.

2. By submitting this Request Form, you are agreeing to pay to the Commission, in advance of receiving copies of any public records, the copying and certification fees set forth in Section II below.

The fees set forth in Section II may be waived or reduced by the General Manager of the Commission upon proof that the purpose of your request is primarily to benefit the general public and that you will receive no significant personal or commercial benefit from your request. If you wish to be considered for such a waiver or reduction, you must complete and separately sign the statement set forth in Paragraph B of Section II.

3. In Section III, indicate the purposes for which you are requesting the public records identified in Section I.
4. The Commission will not mail copies of public records except upon satisfactory proof that it would be unduly burdensome for the Requestor to inspect or pick up the copies at the DuPage Pumping Station and upon advance payment of the actual cost of postage. If you wish to request mailing of the requested records, you must complete and separately sign the statement set forth in Section IV.
5. You must provide the information requested in Section V.
6. You must sign the statement set forth in Section VI.

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 The Commission will disclose the public records requested on this Request Form within seven Working Days after the receipt of this Request Form, unless the seven-day period is extended as provided by law or the request is denied. All extensions and denials will be in writing and will state the reasons therefor. A denial may be appealed to the Commission Chairman within 14 Working Days after the date of the Notice of Denial. All appeals must be in writing. Judicial review is available under Section 11 of the Illinois Freedom of Information Act, 5 ILCS 140/1 et seq. For more detailed information, please consult the DuPage Water Commission Rules and Regulations for Implementation of the Illinois Freedom of Information Act, which are available from the Financial Administrator.  
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To: Financial Administrator  
 DuPage Water Commission  
 600 East Butterfield Road  
 Elmhurst, Illinois 60126-4642

**I. Request for Records.**

I hereby request the right to inspect, or to obtain copies or certified copies of, the following public records of the DuPage Water Commission:

Records Requested	I	C	R
_____	---	---	---
_____	---	---	---
_____	---	---	---
_____	---	---	---

**II. Agreement to Pay Fees.**

A. Unless a waiver is requested and approved pursuant to Paragraph B of this Section, I agree to pay the following fees for all public records copied or certified at my request:

- |                                 |    |                                       |
|---------------------------------|----|---------------------------------------|
| 1. Copies -- 8 1/2" x 11"       | -- | \$0.25 per side                       |
| 2. Copies -- 24" x 36" blueline | -- | \$0.85 per side                       |
| 3. Certification                | -- | \$0.10 per document<br>plus copy cost |

B. I request a waiver of the fees set forth in Paragraph A of this Section, and, in support of such request, I do hereby certify and represent

that I will gain no significant personal or commercial benefit from the public records herein requested and that my principal purpose in making this request is to benefit the general public by disseminating information concerning the health, safety, welfare, or legal rights of the general public in the following specific manner:

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\_\_\_\_\_  
Signature of Requestor

**III. Purpose of Request.**

I am requesting access to the public records identified in Section I above for the following purpose:

- Research Personal Information
- Commercial Use
- News Coverage
- Other (Please Specify)

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**IV. Request for Mail Delivery.**

I request that the Commission mail to me at the address set forth in Section V below copies of all public records responsive to this request. I understand that I will be required to, and do hereby agree to, pay the actual postage for such mailing before the records will be mailed. It would be unduly burdensome for me to pick up the requested records at the DuPage Pumping Station because

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\_\_\_\_\_  
Signature of Requestor

**V. Identification of Requestor.**

A. Name of Requestor: \_\_\_\_\_

B. Name of person for whom records are being requested (if not Requestor):

\_\_\_\_\_

C. Address for Responses, Decisions, and Communications:

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

D. Telephone Numbers of Requestor:

Day: \_\_\_\_\_

Evening: \_\_\_\_\_

**VI. Signature of Requestor.**

By signing this Request, I acknowledge and represent that I have reviewed and understood the DuPage Water Commission Rules and Regulations for Implementation of the Illinois Freedom of Information Act and that all of the information provided in support of this request is true and accurate.

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

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FOR COMMISSION USE ONLY

Received by the DuPage Water Commission, DuPage, Cook, and Will Counties,  
Illinois:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Method of Delivery:        \_\_\_ Personal Delivery during Business Hours  
                                  \_\_\_ Personal Delivery after Business Hours  
                                  \_\_\_ Mail Delivery during Business Hours  
                                  \_\_\_ Mail Delivery after Business Hours

Commission employee receiving request:

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

Signature: \_\_\_\_\_

Response Due: \_\_\_\_\_  
(Seven Working Days after day of receipt)

Commission employee responsible for compiling response:

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