



Environmental Health Division
3415 - 28th Street, Port Huron, MI 48060
(810) 987-5306 Fax (810) 985-5533



FREEDOM OF INFORMATION ACT REQUEST FORM

As a governmental agency, the County of St. Clair is required to comply with Public Act 442 of 1976, the Freedom of Information Act (FOIA). If you are interested in obtaining documents that fall within the requirements of the FOIA, you may submit a FOIA request in writing to the St. Clair County Health Department. **Pursuant to the FOIA, the County of St. Clair is entitled to charge a fee for a public record search, the necessary copying of a public record for inspection, or for providing a copy of a public record when the FOIA request results in an unusually high cost to the County.** You will be contacted by the FOIA Coordinator with any applicable charges prior to the mailing of the FOIA documents. It is understood that, by law, the St. Clair County Health Department has five business days to respond to your request.

Date of Request: _____ **YOUR NAME:** _____

Owner Realtor Other _____

YOUR ADDRESS: (Street, City, State, Zip) _____

YOUR TELEPHONE NUMBER: _____, **YOUR FAX Number:** _____

YOUR e-mail address: _____

DESCRIPTION OF REQUESTED INFORMATION: _____

INFORMATION REQUESTED FOR THE FOLLOWING LOCATION:

STREET ADDRESS: _____

TOWNSHIP / MUNICIPALITY: _____ SECTION NUMBER: _____

Signature: _____

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FOR HEALTH DEPARTMENT USE ONLY

Information provided: _____

Date request received: _____ Date information sent / given _____

Number of copies: _____ Amount due \$ _____ Receipt # _____

By: _____ Date: _____