



FREEDOM OF INFORMATION ACT
REQUEST FOR INFORMATION

DATE

I, the undersigned, hereby request a copy of the following Escanaba City Record(s): (Describe in detail, including date of incident and file number if available)

I understand that the City may charge me for this service. I hereby agree to pay the charge for the furnishing of this information in advance of receiving same.

Applicant

Address

Phone Number

Email

FOR CITY USE ONLY

Request reviewed and approved/denied: Date _____ Dept. Head _____

Person to whom documents were supplied if different from above: _____

Description of documentation supplied: _____

Date documents supplied: _____ Fee: _____ Collected: _____

Account Number: 101-000-627-000

FOIA Fee Itemization Form

(Effective July 1, 2015)

Component	Cost Calculations	Total
1. Labor Costs – Search, Location, and Examination of Records	<p>Enter the hourly wage of lowest paid employee capable of performing the search, location and examination <div style="text-align: right;">\$_____ per hour</div></p> <p>Multiply the wage by the fringe benefit multiplier (maximum of 50% of the hourly wage); OR, if the requested information is available online and the requestor request the documents to be provided in another format, the fringe benefit multiplier may exceed 50% (not to exceed actual cost) <div style="text-align: right;">_____%</div></p> <p>Multiply the hourly wage times the fringe benefit multiplier <div style="text-align: right;">\$_____ x 1.____ = \$_____</div></p> <p>If stipulated by the requestor, add the hourly overtime wage increment (but do not include in the calculation of fringe benefit costs) <div style="text-align: right;">\$_____ + _____ = \$_____</div></p> <p>Divide the resulting hourly wage by four (4) to determine the charge per fifteen (15) minute increment <div style="text-align: right;">\$_____ / 4 = \$_____</div></p>	
	<p>Number of 15 minute increments (partial time increments must be rounded down) multiplied by the permitted rate <div style="text-align: right;">_____ x \$_____ = \$_____</div></p>	<p>\$_____</p>
2. Employee Labor Costs – Redaction*	<p>If performed by the public body's employee:</p> <p>Enter the hourly wage of lowest paid employee capable of performing the redaction <div style="text-align: right;">\$_____ per hour</div></p> <p>Multiply the wage by the fringe benefit multiplier (maximum of 50% of the hourly wage); OR, if the requested information is available online and the requestor request the documents to be provided in another format, the fringe benefit multiplier may exceed 50% (not to exceed actual cost) <div style="text-align: right;">_____%</div></p> <p>Multiply the hourly wage times the fringe benefit multiplier</p>	

	$\text{\$} \underline{\hspace{1cm}} \times 1. \underline{\hspace{1cm}} = \text{\$} \underline{\hspace{1cm}}$ <p>If stipulated by the requestor, add the hourly overtime wage increment (but do not include in the calculation of fringe benefit costs)</p> $\text{\$} \underline{\hspace{1cm}} + \underline{\hspace{1cm}} = \text{\$} \underline{\hspace{1cm}}$ <p>Divide the resulting hourly wage by four (4) to determine the charge per fifteen (15) minute increment</p> $\text{\$} \underline{\hspace{1cm}} / 4 = \text{\$} \underline{\hspace{1cm}}$	
	<p>Number of 15 minute increments (partial time increments must be rounded down) multiplied by the permitted rate</p> $\underline{\hspace{1cm}} \times \text{\$} \underline{\hspace{1cm}} = \text{\$} \underline{\hspace{1cm}}$	$\text{\$} \underline{\hspace{1cm}}$
2. Contracted Labor Costs – Redaction*	<p>If performed by Contracted Labor (Only permitted if the public body does not employ a person capable of redacting the records as determined by the FOIA Coordinator):</p> <p>Name of person or firm contracted: _____</p> <p>Enter the hourly rate charged by the contractor (may not exceed six (6) times the State minimum wage (i.e. $\text{\\$}8.15 \times 6 = \text{\\$}48.90$)</p> $\text{\$} \underline{\hspace{1cm}} \text{ per hour}$ <p>Divide the hourly rate by four (4) to determine the charge per fifteen (15) minute increment</p> $\text{\$} \underline{\hspace{1cm}} / 4 = \text{\$} \underline{\hspace{1cm}}$	
	<p>Number of 15 minute increments (partial time increments must be rounded down) multiplied by the permitted rate</p> $\underline{\hspace{1cm}} \times \text{\$} \underline{\hspace{1cm}} = \text{\$} \underline{\hspace{1cm}}$	$\text{\$} \underline{\hspace{1cm}}$
3. Non-Paper Physical Media	<p>Actual and most reasonably economical cost of:</p> <p>Flash Drives $\text{\\$} \underline{\hspace{1cm}} \times \text{number used } \underline{\hspace{1cm}} = \text{\\$} \underline{\hspace{1cm}}$</p> <p>Computer Discs $\text{\\$} \underline{\hspace{1cm}} \times \text{number used } \underline{\hspace{1cm}} = \text{\\$} \underline{\hspace{1cm}}$</p> <p>Other Media $\text{\\$} \underline{\hspace{1cm}} \times \text{number used } \underline{\hspace{1cm}} = \text{\\$} \underline{\hspace{1cm}}$</p>	$\text{\$} \underline{\hspace{1cm}}$
4. Paper Copies	<p>Actual total incremental cost of duplication (not including labor) up to a <u>maximum of 10 cents per page</u>:</p> <p>Letter paper (8 ½” x 11”) number of sheets $\underline{\hspace{1cm}} \times \text{\\$}0. \underline{\hspace{1cm}} = \text{\\$} \underline{\hspace{1cm}}$</p> <p>Legal paper (8 ½” x 14”) number of sheets $\underline{\hspace{1cm}} \times \text{\\$}0. \underline{\hspace{1cm}} = \text{\\$} \underline{\hspace{1cm}}$</p>	

	<p style="text-align: right;">number of sheets ___ x \$0. ___ = \$ _____</p> <p>Actual cost of other types of paper:</p> <p>Type of Paper: _____ number of sheets ___ x \$ _____ = \$ _____</p> <p>Type of Paper: _____ number of sheets ___ x \$ _____ = \$ _____</p> <p>(NOTE: Must print double-sided if available and costs less.)</p>	\$ _____
5. Labor Cost – Duplication Copying, and transferring records to non-paper physical media	<p>Enter the hourly wage of lowest paid employee capable of performing the duplication, copying, or transferring digital records to non-paper physical media</p> <p style="text-align: right;">\$ _____ per hour</p> <p>Multiply the wage by the fringe benefit multiplier (maximum of 50% of the hourly wage); OR, if the requested information is available online and the requestor request the documents to be provided in another format, the fringe benefit multiplier may exceed 50% (not to exceed actual cost)</p> <p style="text-align: right;">_____ %</p> <p>Multiply the hourly wage times the fringe benefit multiplier</p> <p style="text-align: right;">\$ _____ x 1. _____ = \$ _____</p> <p>If stipulated by the requestor, add the hourly overtime wage increment (but do not include in the calculation of fringe benefit costs)</p> <p style="text-align: right;">\$ _____ + _____ = \$ _____</p> <p>Divide the resulting hourly wage by _____ to determine the charge per _____ (___) minute increment</p> <p style="text-align: right;">\$ _____ / 4 = \$ _____</p> <p>(NOTE: May use any time increment for this category)</p>	
	<p>Number of ___ minute increments (partial time increments must be rounded down) multiplied by the permitted rate</p> <p style="text-align: right;">_____ x \$ _____ = \$ _____</p>	\$ _____
6. Mailing	<p>Actual cost of mailing records in a reasonable and economical manner:</p> <p style="text-align: right;">Cost of mailing: \$ _____</p> <p>Cost of least expensive form of postal delivery confirmation:</p> <p style="text-align: right;">\$ _____</p> <p>Cost of expedited shipping or insurance only if specifically stipulated by the requestor:</p> <p style="text-align: right;">\$ _____</p>	\$ _____

	Subtotal	\$ _____
Waivers and Reductions	<p>Subtract any Fee Waiver or Reduction: \$20.00 for indigency or nonprofit organization as further described in the Public Body's procedures and guidelines.</p> <p>Any amount determined by the Public Body due to the search and furnishing of the Public Record determined to be in the public interest. \$ _____</p> <p>The reduction amount due to the late response of the Public Body. 5% of fee x ____ days late = _____% reduction (maximum reduction is 50%)</p>	-\$ _____
Deposit	Subtract any good-faith deposit received: \$ _____	-\$ _____
	Total Due	\$ _____