



FOIA Appeal Denial of Records Form
Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.

Date Received: _____ **Received Via:** Hand Delivered Mail E-Mail Fax Other

Request for: Copy Certified Copy Record Inspection Electronic Format Subscription

Delivery Method: Pick-Up Make own copies onsite Mailed Emailed Electronic Format

Requester Information – please print or type:

Name:		Phone:
Business/Organization:		Fax:
Address:		Email:
City:	State:	ZIP:

Describe the public record(s) you requested (listed here or see attached copy of original request):

REASON(S) FOR APPEAL

The appeal must identify the reason(s) for the denial. You may use this form or attach additional sheets:

Requester's Signature: _____ **Date:** _____

CITY OF ESCANABA'S RESPONSE/DETERMINATION

The City of Escanaba must provide a response within 10 business days after receiving this appeal, including determination or taking one 10 day extension.

City of Escanaba Extension: We are extending the date to respond to your FOIA denial appeal for no more than 10 business days. Only one extension may be taken per FOIA appeal. Unusual circumstances warranting extension: _____

If you have any questions regarding this extension, contact the City Clerk's office at 906-786-1194.

City of Escanaba Determination: Denial Reversed Denial Upheld Denial Reversed in Part and Upheld in Part

Written basis for determination/records released: _____

Notice of Requester's Right to Seek Judicial Review

You are entitled under Section 10 of the Michigan FOIA Act, MCL 15.240, to appeal a FOIA record denial if you believe they were wrongfully withheld from disclosure. To appeal this denial, you may submit a written appeal to the City Manager, City Council, or Circuit Court. If, after judicial review, the Court determines that the City has not complied with MCL 15.235 amended making this denial and orders disclosure of all or a portion of a public record, you have the right to receive attorney's fees and damages as proved in MCL 15.240.

Signature of FOIA Coordinator: _____

Date: _____



Mission Statement:

Enhancing the enjoyment and livability of our community by providing quality municipal services to our citizens.
The City of Escanaba is an equal opportunity employer and provider.