

Freedom of Information Act Request



The Mayor & Council of Middletown
 19 West Green Street
 Middletown, DE 19709
 PHONE: (302) 378-2711
 FAX: (302) 378-5672
 www.middletownde.org

Pursuant to the Town of Middletown Freedom of Information Act Policy 4.1.1, all requests for public information shall be made in writing, by submitting a Town of Middletown Freedom of Information Act Request Form. Please allow ten (10) business days for request to be processed.

Applicant Information:

Name _____
Last First

Street Address _____

Unit/Apartment Number _____ City _____ State _____ Zip _____

Date: _____ Email address: _____

Phone # _____ Fax # _____

Information Request (please be specific):

1. _____
2. _____
3. _____
4. _____
5. _____

By signing below, I agree that the Town of Middletown has provided me with sufficient opportunity to review the Town of Middletown Freedom of Information Act Policy. I affirm that I have read and understand the Town of Middletown Freedom of Information Act Policy. I understand that payment is due (if applicable) at the time documents are delivered.

 Signature of Requestor

 Date

Internal Use Only:

Date Delivered	Copies	Plans	Audio	Zoning C&M	Comp	Charter	Map	SubRegs	Specs
Invoice Number		Amount		Payment Method		Payment Date		Reference Number	

Notes: