

**PROCEDURE FOR OBTAINING INFORMATION FROM THE
VILLAGE OF ROMEOVILLE**

1. Requests for copies or inspection of the Village of Romeoville's records should be directed to the following:

Candice Roberts-FOIA Officer
Village of Romeoville Clerk's Office
13 Montrose Dr.
Romeoville, IL 60446

Susan Schergan-FOIA Officer
Village of Romeoville Building Department
17 Montrose Dr
Village of Romeoville

Karyn Showers-FOIA Officer
Village of Romeoville Police Department
10 Montrose Dr
Romeoville, IL 60446

Diane Donegan-FOIA Officer
Village of Romeoville Fire Department
18 Montrose Dr
Romeoville, IL 60446

2. All requests for records must be in writing. The appropriate form can be obtained either from the front counter staff at the Village Hall or by clicking [here](#). The Village of Romeoville must comply with or deny a request for records within 5 business days.
3. The Village of Romeoville is not required to allow inspection and copying of any records falling within any of the exemptions noted in Section 7 of the Freedom of Information Act.
4. The Illinois Freedom of Information Act allows for the imposing of fees for the copying of requests for public records. The fees are as follows: the first 50 black and white copies are free of charge with each additional copy after 50 pages being \$.15 a page. For color copies, abnormally sized copies or copies on other media, the Village may charge a fee equal to the actual cost of these copies.

VILLAGE OF ROMEOVILLE
REQUEST FOR INFORMATION

Return to: Village of Romeoville
13 Montrose Drive
Romeoville, Illinois 60446
815/886-7200 (Phone)
815/-886-2762 (Fax)

Date of Request _____

Name: _____

Phone: _____

Address: _____

E-Mail Address: _____

I hereby request to inspect the following records (Describe with as much particularity as possible):

Please indicate if you would like copies of all records (see attached fee schedule).

_____ Inspection Only _____ Inspection requested prior to copying _____ Copies

This request is/is not (choose one) for a commercial purpose

Signature: _____

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For Office Use Only

Received by: _____ Sent to: _____ Date: _____

Completed by: _____ Date: _____

Notes: _____

Amount of Fees Due \$ _____

Date Paid: _____