

# Freedom of Information Act Request



The Mayor & Council of Middletown  
19 West Green Street  
Middletown, DE 19709  
PHONE: (302) 378-2711  
www.middletown.delaware.gov

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 fifteen (15) business days for request to be processed.

## Applicant Information:

Name \_\_\_\_\_  
Last First

Street Address \_\_\_\_\_

Unit/Apartment Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date: \_\_\_\_\_

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:									