

# Town of Lincoln

## Freedom of Access Request for Information

*Note: All Town of Lincoln FOAA requests should be directed to Amanda Woodard, FOAA Officer at 794-3372.*

This form has been created to track requests for information which require staff research. It is not intended to dissuade any individuals from making a request. In accordance with 1 MRSA § 408-A the Town shall provide the information requested within a reasonable period of time **or** a written response outlining why the information is not available within 5 days from the receipt of this request. Requests received when the Town Offices are closed will be considered received at 9 am on the next business day. Public records (1 MRSA § 408-A for definition of public record) are available for review during regular business hours. Copies requested will be made in accordance with the posted rate schedule. Research performed by Town employees will be charged at \$15/hr after the first hour which shall be free.

**Applicant(s):** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Date(s) of Information requested** \_\_\_\_\_

### Type of Information Requested

- Correspondence
- Vendor Contracts
- Town Council/Committee Minutes
- Misc. Documents      Please specify \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### For Office Use Only:

**Request received :** Staff Member: \_\_\_\_\_

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

**Request completed:** Staff Member \_\_\_\_\_

Fee \_\_\_\_\_  Cash       Ck# \_\_\_\_\_  MO

If no fee, why? \_\_\_\_\_

Authorized by: \_\_\_\_\_

### Time Spent Researching:

<u>Date/Hrs</u>	<u>Date/Hrs</u>	<u>Date/Hrs</u>	<b>Total Time:</b> _____
_____	_____	_____	Note additional Date/Hrs
_____	_____	_____	on back of form (if needed)