



FREEDOM OF INFORMATION ACT (FOIA)
REQUEST FORM

Pursuant to the Illinois Freedom of Information Act (FOIA), we are hereby requesting specified information in the files of the Four Rivers Sanitation Authority.

REQUESTING PERSON/ORGANIZATION INFORMATION (PLEASE PRINT LEGIBLY)

- A. ORGANIZATION:
B. NAME:
C. STREET ADDRESS:
D. CITY/STATE/ZIP:
E. PHONE:
F. E-MAIL ADDRESS:

Is this request for commercial purposes? YES NO

Are you requesting a waiver or reduction of fees? YES NO

INFORMATION REQUESTED

- A. ORGANIZATION NAME:
B. PROPERTY CODE/LOCATION:
C. TIME PERIOD: FROM TO
D. INFORMATION REQUESTED (Please be specific. Attach additional pages, if necessary.):

Signature of Requestor

Please submit this information to Four Rivers Sanitation Authority via one of the following methods:

E-Mail: web_foia@fourrivers.illinois.gov
U.S. Mail or Hand-Delivery: Four Rivers Sanitation Authority, 3501 Kishwaukee St., Rockford, IL 61109
Rev. 05032024

Office Use Only
Request submitted via: web e-mail U.S. Mail Hand-delivered Date Received: Response Due By Fee