Town of Atlantic Beach

717 30th Avenue South Atlantic Beach, SC 29582

Phone: 843 663-2284 Fax: 843 663-0601

FREEDOM OF INFORMATION ACT REQUEST FORM Note to Requester: Retain a copy of this request for your files.

| Request Submitted By: E-mail | U.S. Mail | Fax | n Person | | |
|---|---|--|-------------------------------|--|--|
| Date Requested (Required) | | | | | |
| Name of Requester (Required) | | | | | |
| Street Address (Entire Address Required) | | City | | State | Zip Code |
| Telephone (Optional) Information Requested: (Provide as much | E-mail (Opti | | oublic body can ident | Fax (Option | |
| | - <u>199</u> | 7 | | | |
| You may attach additional pages, if neo | cessary. | | <u> </u> | - | 20 A SA S |
| Requestor's Signature | | | | | |
| Do you want Paper Copies of the docu | ments? | YES | NO 🗌 | | |
| Do you want Electronic Copies Electronic Copies are provided in PDF forma | nt. | YES | NO 🗌 | | |
| Is this request for a Commercial Purpo (It is a violation of the Freedom of Information A a commercial purpose, if requested to do so by ti | ct for a person to | | NO n a public record for a | n commercial pui | rpose without disclosing that it is for |
| Are you requesting a fee waiver? (If you are requesting that the public body waive whether the principal purpose of the request is to public. 5 ILCS 140/6(c)). | | | | | |
| | -30 (B) S.C. CODE of to exceed the rge when the age ourly rate for ma | E OF LAWS, 1976 actual cost of sec ency determines t | hat waiver or reduction | IDES AS FOLLOW opies of records. on of the fee is in | Documents may be furnished when n the public interest. The custodian |
| SECTION 30-2-50 (B) S.C. Code of Laws, provides solicitation purposes. | that personal in | IMPORTANT (formation obtain | | ls is prohibited f | rom being used for commercial |
| FOR OFFICE USE ONLY: REQUEST ASSIGNED TO: DATE RESPONSE DUE: | DATE OF | ASSIGNMENT: | DATE OF CO | | FEE FOR SERVICE: D OF PAYMENT: |

Freedom of Information Act Request Fee Schedule

Under this Policy, the Town of Atlantic Beach has duly adopted the fee schedule set forth below for copies and for staff assistance in searching for/or providing requested information.

| | Hours | X Rate | Cost |
|---|------------------|-------------------------------|------|
| Search/Retrieval/Redact Time_Regular Town Business | | \$16.50/hr. | |
| Search/Retrieval/React Time_ Police Related | | \$22.89/hr. | + |
| Copies: | Number of Pages: | Unit Price (1Pg.=1 Unit) | |
| Paper Records/Standard Reports | | \$0.25/page | - |
| Standard Color Copies | | \$0.30/page | |
| Audio Files | | \$6.00/page | 1 |
| CD/DVD | | \$1.00 each + production time | |
| Standard Maps Larger than 8.5" x 14" | I I I V COUNTY | Actual Cost | 1 |
| Offsite Non-Standard Printing | | Actual Rate + time + mileage | |
| Postage/Shipping (USPS/FEDEX/UPS) | | Actual Rate | |
| TOTAL COST | | | |

^{***}Requests which are estimated to require three or more hours of staff time for research will be accompanied by a deposit of 25% to defray costs in the event the requestor fails to pay for copies and wages of the staff collecting and copying the documents. No documents shall be released until such time as the difference is remitted. NO FOLA request shall be honored for any person who has failed to reimburse the Town for costs associated with prior FOLA requests until such time as they remit the fees that are in arrears.