



Your Neighbors...Working For You

Freedom of Information Request Form
(864) 942-8105

Date:

Contact Information

Name:		Company/Organization:	
Street Address:	City:	State:	Zip Code:
Phone Number:		Email:	

Request Information

I'm requesting: Document copies In person review Electronic copies via secure email

Department if known:

Staff contact if known:

Description of documents requested:

Family Privacy Protection Act Statement

The Family Privacy Protection Act, SC Code Section 30-2-50, prohibits any person or private entity from knowingly obtaining or using any personal information obtained from our agency for commercial solicitation directed to any person in the State. Violation of this law is a crime. I have read and understand this statement. I am not requesting personal information for the purposes of commercial solicitation or in violation of law.

Signed:

Submitting Request

Email: foia@greenwoodcpw.com

Fax: (864)942-8111

Mail: Greenwood CPW, Manager's Office, P.O. Box 549, Greenwood, SC 29648

Office Use Only

Date completed:

Billing Information: Research Time: Cost:

Description:

Page count #: Redactions: Yes No

Delivery Options: Pick Up Emailed Mailed Other:

TOTAL CHARGE:

Instructions for Completing Greenwood CPW FOIA Form

Purpose: This form is used to obtain records under of the S.C. Freedom of Information Act

Who completes the form: Any person seeking review or copies of public records of the CPW.

Instructions:

1. Fill out the top portion of the form by providing complete contact information. We may contact you to obtain additional information necessary to fulfill your request. Please provide a telephone number where you can be reached between 8:00 a.m. to 5 p.m., Monday through Friday.
2. Provide as much information about the desired documents as possible.
3. Read and sign the Family Privacy Protection Act statement.
4. Submit the form: E-mail, fax or mail completed form as shown above.