



234 S. State Street  
P.O. Box 457  
Hampshire, IL 60140

Phone No. 847-683-2181  
Fax: 847-683-4915  
www.hampshireil.org

**Written Request for Inspection or Copying of Public Records**

Name: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Please specify the public record(s) you are requesting and indicate whether you wish to inspect the copies or receive a copy of such record(s). Also, identify those public records which are to be certified.

**COMMERCIAL** \_\_\_\_\_ **COPY** \_\_\_\_\_ **INSPECT** \_\_\_\_\_ **CERTIFY** \_\_\_\_\_

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

The Village of Hampshire will respond to the above request within (5) working days from the above date, for commercial (21) working days.

\_\_\_\_\_

Signature

Estimate date completed: \_\_\_\_\_

(For Office Use Only)

Routing for Response:

- President
- Administrator
- Clerk
- Treasurer
- Public Works
- Community Development
- Zoning
- Building
- Planning
- Attorney
- Police Dept.
- \_\_\_\_\_ Other (Specify)

CC:

- President
- Administrator
- Clerk
- Treasurer
- Public Works
- Community Development
- Zoning
- Building
- Planning
- Attorney
- Police Dept..
- \_\_\_\_\_ Other (Specify)

### ***Request for Public Records***

Information Gathered by: \_\_\_\_\_

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

Information Received by: \_\_\_\_\_

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

Amount Charged for Copies: \_\_\_\_\_

Receipt Number: \_\_\_\_\_