

CITY OF COLDWATER

Freedom of Information Act Request Itemized Cost Worksheet

<p>Pursuant to Section 4 of the Michigan Freedom of Information Act, MCL 15.234, the following costs will be charged for responses to FOIA requests, according to the FOIA Fee Schedule adopted and periodically revised by the City Council.</p>		
<p>1. Labor Cost to <u>Locate</u>:</p> <p>This is the cost of labor directly associated with the necessary searching for, locating, and examining public records in conjunction with receiving and fulfilling a granted written request. The City will not charge more than the hourly wage of its lowest-paid employee capable of searching for, locating, and examining the public records in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in 15-minute time increments; all partial time increments must be rounded down. <i>If the number of minutes is less than 15, there is no charge.</i></p> <p>Hourly Wage Charged: \$ _____ Charge per increment: \$ _____ OR Hourly Wage with Fringe Benefit Cost: \$ _____ Multiply the hourly wage by the percentage multiplier: _____% <i>(up to 50% of the hourly wage)</i> and add to the hourly wage for a total per hour rate. Charge per increment: \$ _____</p>	<p>To figure the number of increments, take the <i>number of minutes</i>: _____, <i>divide by 15-minute increments, and round down.</i> <i>Enter below:</i></p> <p>Number of Increments x _____ =</p>	<p>Labor Cost \$ _____</p>
<p>2. Labor Cost for <u>Copying</u>:</p> <p>This is the cost of labor directly associated with duplication of publication, including making paper copies, making digital copies, or transferring digital public records to be given to the requestor on non-paper physical media or through the Internet or other electronic means as stipulated by the requestor. This shall not be more than the hourly wage of the City's lowest-paid employee capable of necessary duplication or publication in this particular instance, regardless of whether that person is available or who actually performs the labor. These costs will be estimated and charged in 15-minute time increments; all partial time increments must be rounded down. <i>If the number of minutes is less than 15, there is no charge.</i></p> <p>Hourly Wage Charged: \$ _____ Charge per increment: \$ _____ OR Hourly Wage with Fringe Benefit Cost: \$ _____ Multiply the hourly wage by the percentage multiplier: _____% <i>(up to 50% of the hourly wage)</i> and add to the hourly wage for a total per hour rate. Charge per increment: \$ _____</p>	<p>To figure the number of increments, take the <i>number of minutes</i>: _____, <i>divide by 15-minute increments, and round down.</i> <i>Enter below:</i></p> <p>Number of increments x _____ =</p>	<p>Labor Cost \$ _____</p>

4. Copying (duplication or printing):

Copying costs may be charged if a copy of a public record is requested, or for the necessary copying of a record for inspection (*for example, to allow for blacking out exempt information, to protect old or delicate original records, or because the original record is a digital file or database not available for public inspection*).

No more than the actual cost of a sheet of paper, up to maximum 10 cents per sheet:

Letter (8 ½ x 11-inch, single- or double-sided): **8 cents per sheet**

Legal (8 ½ x 14-inch, single- or double-sided): **8 cents per sheet**

No more than the actual cost of a sheet of paper:

Other paper sizes (single- or double-sided): **8 cents per sheet**

Actual and most reasonably economical cost of non-paper physical digital media:

Circle applicable: Disc / Tape / Drive / Other Digital Medium

Cost per Item: _____

Number of Sheets:

x _____ =

x _____ =

x _____ =

Number of Items:

x _____ =

Total Cost

\$ _____

\$ _____

\$ _____

\$ _____

5. Mailing:

The City will charge the actual cost of mailing, if any, for sending records in a reasonably economical and justifiable manner. *The City will not charge more for expedited shipping or insurance unless specifically requested by the requestor. The City *may* charge for the least expensive form of postal delivery confirmation.

Cost of Envelope or Package: \$ _____

Postage: \$ _____ per stamp

\$ _____ per pound

\$ _____ per package

Postal Delivery Confirmation: \$ _____

***Expedited Shipping or Insurance as requested:** \$ _____

Number of Env./Pkg.:

x _____ =

Total Cost

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Proof or Affidavit of Indigency Submitted: Yes _____ No _____

Subtract \$20.00

(\$ _____)

Estimated Cost

\$ _____

Note: If Estimated Cost Exceeds \$50.00, a Good Faith Deposit of 50% Required Before Request Will Be Processed.

Date Paid

50% Deposit:

\$ _____

Note: Request Will Be Processed, But Balance Must Be Paid Before Copies May Be Picked Up, Delivered or Mailed.

Date Paid:

Balance Due:

\$ _____