



TOWNSHIP

**Ada Township  
Kent County, Michigan**

FOIA Coordinator  
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**FOIA Request for Public Records**

**Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et. Seq.**

**Request to:**  Receive copy  Inspect record  Subscribe to record issued on regular basis  
**Delivery Method (upon payment of balance due):**  Pick up records in person  Mail to address below

Name	Phone	
Firm/Organization	Fax	
Street	Email	
City	State	Zip

(Please Print or Type)

**Describe the public record(s) as specifically as possible:**


Requestor's Signature	Date
<b>Consent to Non-Statutory Extension of Township's Response Time</b>	
I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231 et seq. I understand that the township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree to extend the township's response time for this request until _____.	
Requestor's Signature	Date