

**City of Chicago**  
**Department of Administrative Hearings**  
**740 North Sedgwick Street, 2<sup>nd</sup> floor**  
**Chicago, IL 60654**  
**(312) 742-4747**  
**(312) 742-8248 (Fax)**

**FREEDOM OF INFORMATION EMAIL REQUEST FORM**

**From:** \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address, City, State and Zip

\_\_\_\_\_  
Day Phone/Email Address (**Mandatory**)

**The undersigned requests copies of the File Record only**

\_\_\_\_\_  
City of Chicago vs. Case Name (as it appears on any pertinent documents you may have).

\_\_\_\_\_  
Docket and/or Ticket Number(s) (one of these numbers is **mandatory** to process your request)

\_\_\_\_\_  
Address of Violation(s) (must be exact)

\_\_\_\_\_  
Hearing Division (Buildings, Consumer Affairs, Environmental Safety, Municipal, Vehicle)

\_\_\_\_\_  
Name of Administrative Law Officer presiding at hearing (if known)

\_\_\_\_\_  
Date(s) of hearing

**The undersigned hereby certifies, under penalty of law, that he/she is not requesting this information for any illegal or unlawful purpose.**

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<b>Type Name of Requesting Individual</b>	<b>Date</b>
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Emailed copies of your requested file(s) are being provided by the Freedom of Information act and as a convenience to the public. Your request will processed within 7-business days and will be sent to the email address indicated on this form. There is no fee to process your request in this manner.