



*Town of Bellefonte, Delaware*

FREEDOM OF INFORMATION ACT  
PUBLIC DOCUMENT REQUEST FORM

**TO THE APPLICANT:**

Please state with specificity the public documents you are seeking pursuant to the request in the space provided below:

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I would like to VIEW these documents.

Please provide an address where a response may be sent and also a daytime telephone number where you may be contacted:

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I have read and understand the Bellefonte Town Commission's Policy and Procedures regarding requests for public documents under the Freedom of Information Act.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date