

VILLAGE OF ROUND LAKE BEACH ORGANIZATIONAL DESCRIPTION



Purpose of the Village

The purpose of the Village of Round Lake Beach is to provide public services to its residents in the form of police protection, maintenance of public streets, sanitation and water facilities and other services, which it is authorized to provide. The Village is committed to maintaining a safe and secure environment in which there is equal opportunity for everyone to prosper.

Form of Government

The Village of Round Lake Beach is a home rule community which operates under the Trustee-Village form of government. A six-member Board of Trustees, elected at large by Village residents, sets policy and determines local laws and ordinances.

Village Employees

The Village employs approximately 90 full time and part time employees and occasional seasonal employees depending on the needs of the village.

Operating Budget

The operating budget for the fiscal year of May 1, 2013 – April 30, 2014 is \$23,103,018.00

Location of Village Offices

1937 N. Municipal Way, Round Lake Beach, IL, 60073

Administration (847) 546-2351

Economic Department (847) 546-2351

Police Department

1947 N. Municipal Way,

Round Lake Beach, IL 60073 (847) 546- 2127

Public Works

911 N. Lotus, Round Lake Beach, IL 60073 (847) 546-8752

REQUESTS FOR PUBLIC RECORDS

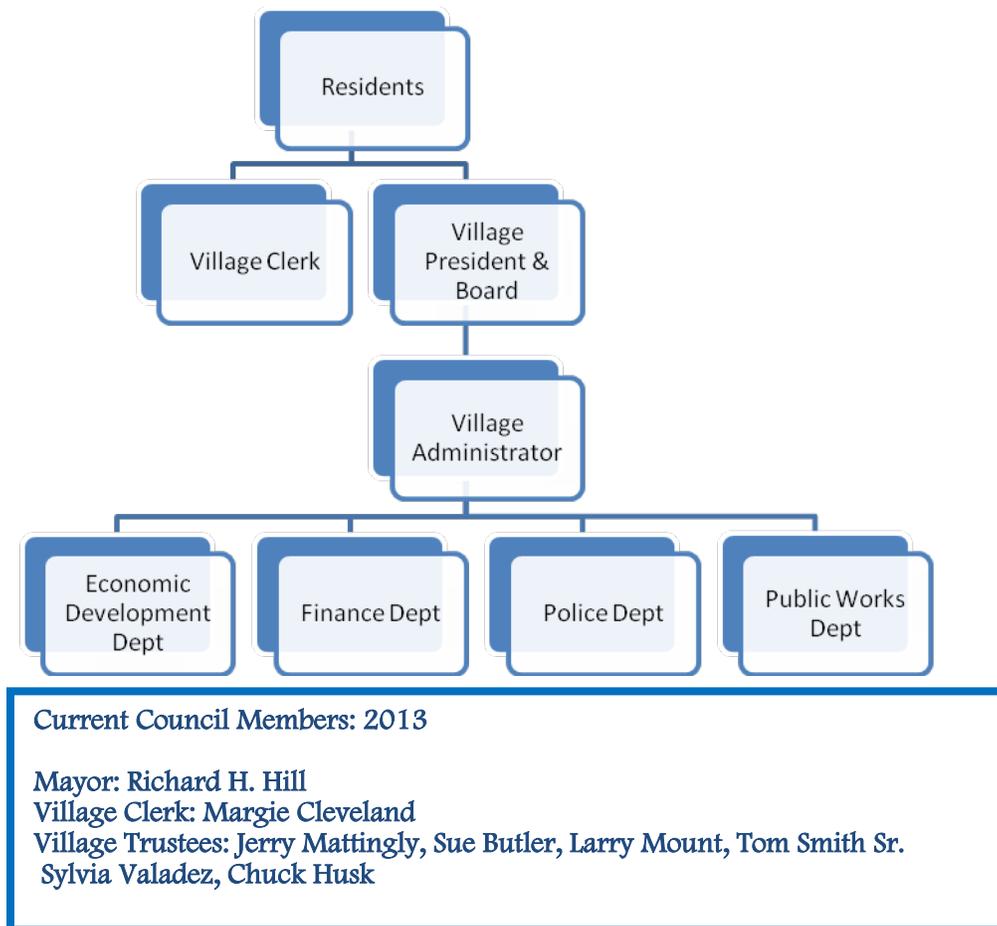
The Village of Round Lake Beach FOIA Officer is Village Administrator David Kilbane.

You may submit a request for public records by email to: foia-requests@rlbeach.org

All requests must be received in writing via personal delivery, mail, fax, or addressed to the email address above. The use of any other email address will not guarantee receipt of request.

A FORM FOR REQUEST OF PUBLIC RECORDS IS AVAILABLE FOR THE CONVENIENCE OF THE GENERAL PUBLIC; THE VILLAGE WILL HONOR ANY LAWFULLY SUBMITTED WRITTEN REQUEST EVEN IF IT IS NOT SUBMITTED ON THE PREFERRED FORM.

FUNCTIONAL SUBDIVISIONS OF THE VILLAGE OF ROUND LAKE BEACH



ADVISORY BOARDS, COMMISSIONS, AND COMMITTEES

PUBLIC SAFETY COMMITTEE

Trustee Larry Mount
Trustee Larry Sylvia Valadez
Trustee Tom Smith
Mayor Richard H. Hill

FINANCE COMMITTEE

Sr. Trustee Jerry Mattingly
Trustee Larry Mount
Trustee Sue Butler
Mayor Richard H. Hill

ECONOMIC DEVELOPMENT COMMITTEE

Sr. Trustee Jerry Mattingly
Trustee Tom Smith Sr.
Trustee Chuck Husk
Mayor Richard H. Hill

PUBLIC WORKS COMMITTEE

Trustee Sylvia Valadez
Trustee Sue Butler
Trustee Chuck Husk
Mayor Richard H. Hill

BOARD OF POLICE COMMISSIONERS

Mitch Bienvenue
Annmarie Pryde
Ralph Unrath

POLICE PENSION BOARD

Ed Gueroult
James Simoncelli
Sandra Molidor
Ryan Rodriguez
Patrice Sutton Burger

PLANNING & ZONING COMMISSION

Mark Bailey
Linette Benes
Audrie Parker
Patrick Vargo
Steve Vaughn
Hal Davis

REQUEST FOR PUBLIC RECORDS

To: FOIA Officer
Village of Round Lake Beach
1937 N. Municipal Way
Round Lake Beach, Illinois 60073

Date: _____

I. Request for Records Describe in detail the public records that you wish to inspect or to have copied or certified. Use a separate sheet if necessary. Indicate whether you wish only to inspect the public records at the Public Body Office or to have the public records copied or certified by checking the appropriate box to the right of each record described.

I hereby request the right to inspect, or to obtain copies or certified copies of, the following public records of the Public Body:

Records Requested	inspect	copied	certified
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. Agreement to Pay Fees By submitting this Request Form, you are agreeing to pay to the Public Body, in advance of receiving copies of any public records, the copying and certification fees set forth in Section II below. The fees set forth in Section II may be waived or reduced by the FOIA Officer only upon proof that the purpose of your request is primarily to benefit the general public and that you will receive no significant personal or commercial benefit from your request. If you wish to be considered for a waiver or reduction, you must complete and separately sign the statement set forth in Section B of Section II.

A. Unless a waiver is requested and approved pursuant to Section B of this Section, I agree to pay the following fees for all public records copied or certified at my request:

1. Copies — letter or legal -- \$.15 per side.
2. Copies — color or oversize -- Actual cost of reproduction.
3. Certification -- \$1.00 per document plus copy cost.
4. Mailing -- Actual cost of postage.

However, there will be no charge for the first 50 pages of letter or legal size black and white copies for a Requestor, except for Requests for commercial purposes. I further acknowledge and agree that, if the services of an outside vendor are required to copy any public record, I will pay the actual charges that the Public Body incurs in connection with such copying services.

B. I request a waiver of the fees set forth in Section A of this Section, and, in support of such request, I certify and represent that I will gain no significant personal or commercial benefit from the records requested and that my principal purpose in making this request is to benefit the general public by disseminating information concerning the health, safety, welfare, or legal rights of the general public in the following specific manner:

Signature of Requestor

III. Purpose of Request Indicate the purposes for which you are requesting the public records identified in Section I.

I am requesting access to the public records identified in Section I for the following purpose:

- Noncommercial Purpose
- Commercial Purpose

A "commercial purpose" is defined under the Act as the use of any part of a public record or records, or information derived from public records, in any form for sale, resale, or solicitation or advertisement for sales or services. Please be advised that misrepresentation of the purpose of a Request is a violation of the Act.

IV. Request for Mail Delivery If you wish to request mailing of the requested records, you must complete and separately sign the statement set forth in Section IV.

I request that the Public Body mail to me at the address set forth in Section V below copies of all public records responsive to this request. I understand that I will be required to, and do hereby agree to, pay the actual postage for such mailing before the records will be mailed.

Signature of Requestor

V. Identification of Requestor You must provide the information requested in Section V.

- A. Name of Requestor: _____
- B. Name of person for whom records are being requested (if not Requestor):

- C. Address for Responses, Decisions, and Communications:

- D. Telephone Numbers of Requestor:
Day: _____
Evening: _____

VI. Signature of Requestor You must sign the statement set forth in Section VI.

By signing this Request, I acknowledge and represent that I have reviewed and understood the Public Body's FOIA Policy and that all of the information provided in support of this request is true and accurate.

Signature of Requestor

Date

The Public Body will disclose the public records requested on this Request Form within five working days after the receipt of this Request Form (or 21 days for a Commercial Purpose Request), unless the time period is extended as provided by law or the request is denied. All extensions and denials will be in writing and will state the reasons therefore. A denial may be appealed to the Public Access Counselor within 60 working days after the date of the Notice of Denial. Judicial review is available under Section 11 of the Illinois Freedom of Information Act, 5 ILCS 140/1 *et seq.* For more detailed information, please consult the Public Body FOIA Policy, which is available from the FOIA Officer.

FOR PUBLIC BODY USE ONLY

Received by the Public Body: Date: _____ Time: _____

Response Due: _____ (Five working days after day of receipt or 21 working days for commercial purpose)

Method of Delivery:

- Personal Delivery Email
 Mail/Courier/Fax Delivery Other _____

Public Body employee receiving request:

Name: _____ Title: _____

Signature: _____