

**SWARTZ CREEK AREA FIRE DEPARTMENT
FREEDOM OF INFORMATION ACT RESPONSE - FEE ESTIMATE**

Name of Person Requesting Information: _____

Date submitted to the FOIA Coordinator: _____

5 day due date: _____

Extended due date: _____

Estimated date when records will be available: _____

Pursuant to Section 4(1) of the FOIA (MCL 15.234), the Swartz Creek Area Fire Department (SCAFD) may recover the labor costs incurred for the search, duplication, mailing, labor, redaction, etc., in responding to your request. You will be responsible for actual duplication costs including, but not limited to, copying costs of not more than \$0.10 per page unless governed by other statutory authority. See MCL 15.234(10).

Based on the nature of your request, it is anticipated that the total fee to be charged in responding to your request will exceed \$50.00. Accordingly, the SCAFD requires a good faith deposit of [50% or 100%] of the total estimated fee before providing the requested records. Below is a detailed itemization of the estimated fees which explains the six fee components listed in Section 4(1) of the FOIA (MCL 15.234).

LABOR COSTS

Estimated Search Cost: \$_____ (\$_____ per hour; ____ # of hours)

The portion of the labor costs associated with the necessary search, location and examination of the requested public records, at a cost of the hourly wage of the lowest-paid employee capable of searching for, locating, and examining the requested records. Labor costs for this portion of the fee are charged in 15 minute increments, with all partial time increments rounded down.

Estimated Review & Redaction Cost: \$_____ (\$_____ per hour; ____ # of hours)

The portion of the labor costs directly associated with the separating and deleting of exempt information from nonexempt information, at a cost of the hourly wage of the lowest-paid employee capable of separating and deleting exempt information from nonexempt information. Labor costs for this portion of the fee are charged in 15 minute increments, with all partial time increments rounded down.

Estimated Contracted Review & Redaction Cost: \$_____ (\$_____ per hour; ____ # of hours)

Contractor's Name: _____

The cost of necessary contracted labor costs used for the separating and deleting of exempt information from nonexempt information at an hourly cost not exceeding an amount equal to 6 times the state's legal minimum hourly wage rate (\$48.90).

Estimated Duplication Cost: \$_____ (\$_____ per hour; ____ # of hours)

The portion of the labor costs directly associated with the duplication or publication, including making paper or digital copies and transmitting those duplications, of the public records, at a cost of the hourly wage of the lowest-paid employee capable of searching for, locating, and examining the requested records. Labor costs for this portion of the fee are charged in 15 minute increments, with all partial time increments rounded down.

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Estimated Fringe Benefit Cost: \$_____ (\$___ hourly fringe benefit value x ___ # of hours)

The SCAFD may add up to 50% to the applicable labor charge to cover or partially cover the cost of fringe benefits. Subject to the 50% limitation, the SCAFD shall not charge more than the actual cost of fringe benefits. Overtime wages may not be used in calculating fringe benefits. If the SCAFD has provided the applicable website address for a record in its written response and the requester thereafter requests that the public record be provided in a paper format or other form, the SCAFD may utilize a fringe benefit multiplier greater than the 50% limitation, but not to exceed the actual costs of providing the information as requested.

Total Estimated Labor Cost: \$_____

NON-LABOR COSTS

Estimated Non-Paper Media Cost: \$_____

The actual and most reasonably economical cost of computer discs, computer tapes, or other digital or similar media.

Estimated Copying Cost: \$_____ (____ @ \$0.10 per page)

Utilizing the most economical means available for making copies of the requested public records.

Estimated Cost of Mailing Cost: \$_____

The actual cost of mailing for sending the public records in a reasonably economical and justifiable manner.

Total Estimated Non-Labor Cost: \$_____

Subtotal Estimated Labor Costs \$_____

Subtotal Estimated Non-Labor Costs \$_____

Total Estimated Costs: \$_____

Total Good Faith Deposit Required \$_____ (Total Estimated Fee × 50/100% (0.50/1.0))