



Midland County Department of Public Health
 Environmental Health Services Division
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In accordance with the Freedom of Information Act (MCL 1.5.231 et seq, Public Act 553 of 1997), as amended, and the Midland County Freedom of Information Act Request Policy, I am requesting the following information: (include the ADDRESS if available)

Township _____ Commercial _____ Residential _____

I understand the Act allows a public body to charge a fee and that I will be notified of same.

Please allow 1-5 business days to receive. We will send information to:

Printed Name _____

Signature _____ Phone _____

Street _____

City _____ State _____ Zip _____

Email _____ Fax _____

Date _____

Environmental Health Representative _____

Date _____