



Mississippi Department of Environmental Quality Freedom of Information Request Form

Under Mississippi Code § 25-61-1 "Mississippi Public Records Act of 1983"

Date of Request: _____ Name of Requestor: _____

Company's Name (if applicable): _____

Address: _____ City _____ State _____ Zip Code _____

Phone No.: _____ Cell Phone No.: _____ Email: _____

Please describe in detail any and all specifics of the document(s) being requested: _____

Please take note that we cannot personally go through files to find specific documents, but will provide you with options for copies of files

Requested Facilities

	Facility Name	City and/or County	MDEQ ID Numbers for the Site
1.			
2.			
3.			
4.			
5.			

If you are requesting more than 5 facilities, please add them to an addition email and email them to foi_mail@deq.state.ms.us

FOR OFFICE USE ONLY:

FOIA Staff Handling Request: _____

Request fulfilled by: _____ Date Received (If mailed in): _____

Mississippi Department of Environmental Quality
Freedom of Information Office

P.O. Box 2261
Jackson, Mississippi 39225

Phone: 601-961-5758
Fax: 601-961-5049