



## NEW CASTLE COUNTY'S FREEDOM OF INFORMATION ACT PUBLIC DOCUMENT REQUEST FORM

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Please identify from which County Office(s) or Department(s) you are seeking documents. If you need assistance as to what Department may possess the requested information, please call the County's general line at (302) 395-5555. Address all FOIA Requests to the identified FOIA Coordinator(s), or their designee in their absence, and indicate on the correspondence: "Attention FOIA Request".

- Department of Land Use** (includes Permitting/Licensing, Planning, Engineering, GIS, Code Enforcement)  
Janine Knieriem: [FOIA@newcastlede.gov](mailto:FOIA@newcastlede.gov); phone (302) 395-5470
- Office of Administrative Services** (includes Information Systems, Records Management)  
Susan Smith: [susan.smith@newcastlede.gov](mailto:susan.smith@newcastlede.gov); phone (302) 395-5562; fax (302) 395-5252
- Office of Finance**  
Joe Szczechowski: [joseph.szczechowski@newcastlede.gov](mailto:joseph.szczechowski@newcastlede.gov); phone (302) 395-5163; fax (302) 395-5155
- Office of Assessment**  
Rachel Sacher: [rachel.sacher@newcastlede.gov](mailto:rachel.sacher@newcastlede.gov); phone (302) 395-5529; fax (302) 395-5544
- Department of Administration\*** (includes Executive Office, Law, Risk Mgmt, Human Resources)  
Karen Sullivan: [karen.sullivan@newcastlede.gov](mailto:karen.sullivan@newcastlede.gov); phone (302) 395-5132; fax (302) 395-5150

*The above-referenced County Office(s) or Department(s) are located at the following address:*  
New Castle County Government Center  
87 Reads Way  
New Castle, DE 19720

- Department of Public Works**  
Linda Levy: [linda.levy@newcastlede.gov](mailto:linda.levy@newcastlede.gov); phone (302) 395-5804; fax (302) 395-5870  
New Castle County Conner Building  
187-A Old Churchmans Road  
New Castle, DE 19720
- Department of Community Services**  
Carrie Casey: [carrie.casey@newcastlede.gov](mailto:carrie.casey@newcastlede.gov); phone (302) 395-5616; fax (302) 395-5592  
New Castle County Gilliam Building  
77 Reads Way  
New Castle, DE 19720
- Department of Public Safety**
  - Div of Emergency Medical Svcs, Div of Emergency Comm (911), Office of Emergency Mgmt**  
Bill Streets: [william.streets@newcastlede.gov](mailto:william.streets@newcastlede.gov); phone (302) 395-8213; fax (302) 571-7350
  - Division of Police**  
Lt Patrick Malone: [policefoia@newcastlede.gov](mailto:policefoia@newcastlede.gov); phone (302) 395-8022; fax (302) 395-8039  
NCC Police Headquarters  
3601 N Dupont Highway (Route 13)  
New Castle, DE 19720

Under specified circumstances, FOIA affords the County a variety of discretionary exemptions which serve as a basis for withholding records from disclosure. These exemptions generally include personnel records, investigatory files compiled for civil or criminal law-enforcement purposes, labor negotiation records, drafts, documents protected by the attorney-client privilege and material made confidential by other state or federal statutes. Exempted documents produced at the County's discretion will be subject to a separate production policy and schedule of fees.



FOR OFFICE USE ONLY: FOIA REQUEST NUMBER

1. CONTACT INFORMATION where a response may be sent

Name of requestor (please print):

Business Name (if applicable):

Address:

City, State, Zip

Phone: (h)

(w)

(cell)

Fax:

E-mail:

Please specify preferred method of communication:

2. Please state with specificity the PUBLIC DOCUMENTS you are seeking pursuant to this request with as much identifying information as possible:

3. If this request is regarding PROPERTY RECORDS, providing the following will expedite your request:

Tax parcel, permit, record plan number(s):

Property address(es):

City, State, Zip:

**I have read and understand New Castle County's Policy regarding requests for public documents under the Freedom of Information Act and attest that the above information is true and correct (typing your name in the box is an electronic signature that has a legal status equivalent to a written signature on paper).**

Applicant Signature

Date:

**FOR OFFICE USE ONLY**

DEPARTMENT CONTACT FULFILLING REQUEST:

DATE REQUEST RECEIVED:

RESPONSE DEADLINE:

DATE OF RESPONSE (AND REASONS FOR ANY EXTENSION):

NAMES, CONTACT INFO, AND DATES OF EMPLOYEES CONTACTED IN CONNECTION WITH REQUEST:

NAMES, CONTACT INFO, OF THOSE CONDUCTING REVIEWS AND DATES OF REVIEW:

TO WHAT EXTENT WAS REQUEST FULFILLED?

BREAKDOWN OF CHARGES (COPYING, OTHER SERVICES, AND/OR ADMINISTRATIVE FEES ASSESSED):

TOTAL: \$ \_\_\_\_\_

PAID BY:    CASH         CHECK         MONEY ORDER         CREDIT CARD