



FOIL - APPLICATION FOR PUBLIC ACCESS TO RECORDS



Date: _____ To: **Laura Swarthout, Records Access Officer**

I HEREBY REQUEST COPIES AND OR APPLY TO INSPECT THE FOLLOWING RECORD (S):
(Please be as specific as possible)

Signature: _____ Email: _____

Printed Name: _____ Phone: _____

Address: _____

City/State/Zip: _____

Number of copies requested: _____ (\$.25 per copy)

Within five (5) business days this agency will respond to your request for records with an approximate date of when the request will be approved or denied.

FOR AGENCY USE ONLY

ANY PERSON DENIED ACCESS TO RECORDS MAY APPEAL THE DENIAL WITHIN 30 DAYS OF DENIAL. SUCH APPEALS SHOULD BE ADDRESSED TO THE TOWN BOARD.

APPROVED

DENIED

Reason for denial:

- ___ Exempted by Statue other freedom of information law
- ___ Unwarranted invasion of personal privacy
- ___ Impairs contract awards or collective bargaining negotiations
- ___ Trade secret (s) confidential bargaining negotiations
- ___ Endanger the life or safety of a person
- ___ Record of which this agency is legal custodian cannot be found
- ___ Law enforcement purposes
- ___ Inter-agency or Intra-agency materials
- ___ Other (specify) _____

Signed: _____ Records access officer, Laura Swarthout