



TO: Records Retention Officer
Town of Essex
2313 Main Street
PO Box 45
Essex, New York 12936

REQUEST FOR ACCESS TO RECORDS

Date: _____

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD UNDER THE PROVISIONS OF THE FREEDOM OF INFORMATION LAW

(PUBLIC OFFICERS LAW, ARTICLE 6, SECTIONS 84-90)

Please note you must fill out a separate form for each record requested. Please be as precise as possible in your description.

I HEREBY REQUEST A COPY OF THE RECORD LISTED ABOVE

NOTE: The Town of Essex charges a reproduction fee of \$.25 black and white per page for 8 1/2" x 11" documents and actual material and reproduction cost for oversized documents, audio and media. No copies can be made until payment is received.

Signature

Print Name

Mailing Address

Phone

Email Address

- APPROVED
- DENIED, for the following reason(s) checked below
- Exempted from disclosure by State or Federal Status
 - Unwarranted invasion of personal privacy
 - Impair imminent contract awards or collective bargaining agreements
 - Trade secrets or maintained for the regulation of commercial enterprise
 - Compiled for law enforcement purposes
 - Disclosure would endanger the life or safety of a person or persons
 - Other: Please specify _____

You have the right to appeal a denial of this application to the Supervisor in writing within 30 days.