



TOWN OF VESTAL

APPLICATION PUBLIC ACCESS TO RECORDS

The Freedom of Information Law reaffirms your right to know how your government operates. It provides rights of access to records reflective of governmental decisions and policies that affect the lives of every New Yorker, under most circumstances.

Within five business days after receiving this request the Town will contact you to acknowledge receipt of your request and to advise you of its status. Please note that the Town may need additional time to gather the requested materials and will advise you of the date the materials will be available.

Date Rec'd by Dept. _____	
For Clerk Use Only	\$.25 Per Page
No. of pages _____	
Fee paid <input type="checkbox"/> _____	
Viewed Only _____	
Date Mailed _____	
How Contacted _____	

APPLICATION REQUEST

PLEASE COMPLETE ALL APPLICABLE INFORMATION, BEING AS EXPLICIT AS POSSIBLE, UNLESS THERE IS AN ATTACHED LETTER SPECIFICALLY DESCRIBING YOUR REQUEST.

TO: Records Access Officer for: _____
Department Name _____ Date of Request _____

- I Request to SEE the Following Records
- I Request a COPY of the Following Records
- Please Refer to Attached Letter

 Purpose of Request (Optional) _____
 Applicant's Name (Please Print) _____
 Applicant's Signature _____
 Applicant's Mailing Address _____
(Include name of firm or organization and mailing address if applicable) _____
 Applicant's Telephone Number _____

FOR AGENCY USE ONLY

At time of request, Department staff must attach to this form any written requests received in lieu of the Town's form and check the appropriate box above.

- APPROVED
 - APPROVED WITH DELETIONS (SEE ITEMS AT RIGHT)
 - DENIED (SEE ITEMS AT RIGHT)
 - RECORD DOES NOT EXIST IN DEPARTMENT FILES
- RECORDS DELETED OR DENIED AS PER:** Public Officers Law, Section 87 (2).
- a) Exempted by state or federal statute
 - b) Unwarranted invasion of personal privacy
 - c) Would impair present/imminent contract awards or collective bargaining negotiations
 - d) Are trade secrets
 - e) Compiled for law enforcement purposes which would:
 - i. interfere with law enforcement investigations or judicial proceedings
 - ii. deprive a person of a right to a fair trial or impartial adjudication
 - iii. identify a confidential source or disclose confidential information relative to a criminal investigation
 - f) Would endanger the life or safety of any person
 - g) Are inter-agency or intra-agency communications
 - h) Are examination questions or answers requested prior to final administration of such questions
 - i) Other _____

SIGNATURE TITLE DATE

APPEAL REQUEST

Please note - you have a right to appeal a denial of this application. Please send this Appeal request to the Town Attorney of the Town of Vestal. David Berger, 605 Vestal Parkway West, Vestal, NY 13850. Telephone 748-1514 ext. 389. The Town of Vestal will fully explain the reasons for such denial in writing within seven days after receiving an appeal.