

FREEDOM OF INFORMATION: Application for Public Access to Records and Response

APPLICATION FOR PUBLIC ACCESS TO RECORDS
(Please print clearly)

TO: [Name]
[Address]

I hereby apply to inspect the records of [name of City/Village/Town]'s
[department/agency/individual] listed below:

Records requested (be as specific as possible; use back of form, if necessary)

Purpose for which records are requested:

Name: _____ Phone: _____
(Self/Organization represented)

Mailing address: _____

Signature: _____ Date: _____

FOR AGENCY USE ONLY

- | | |
|---|--|
| <input type="checkbox"/> APPROVED | <input type="checkbox"/> DENIED |
| <input type="checkbox"/> RECORD CANNOT BE FOUND | <input type="checkbox"/> RECORD NOT MAINTAINED BY AGENCY |

SIGNATURE _____ DATE _____

-----DETACH-----

NOTICE TO APPLICANT: You have a right to appeal a denial of this application to the [Governing Body] of the [City/Village/Town] of [name of City/Village/Town] within 30 days of this denial, which Board must fully explain its reasons for such denial in writing within 10 days of an appeal. Failure to do so constitutes a denial of your appeal.

I hereby appeal:

Name: _____ Signature: _____

Address: _____ Date: _____
