

TOWN OF STONY POINT

74 EAST MAIN ST
STONY POINT, NY 10980
845-786-2716

APPLICATION FOR PUBLIC ACCESS TO RECORDS
(FOIL REQUEST)

Date: _____

To: Megan Carey, Records Access Officer

I wish to inspect the following records(s): (Identify records you are interested in as clearly as possible.)

You may inspect documents first and then ask for copies of the ones you actually want.

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

Signature: _____

Printed Name: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

Daytime Phone: _____

For Agency Use Only

Approved: _____

Date: _____ Time: _____

Photocopies: Number _____ Charge _____

Denied (for the reason(s) checked below)

- _____ Exempted by statute other than Freedom of Information
- _____ Unwarranted invasion of personal privacy
- _____ Would impair contract awards or collective bargaining agreements
- _____ Trade secret; confidential commercial information
- _____ Law enforcement records
- _____ Would endanger the life or safety of any person
- _____ Interagency or intra-agency materials
- _____ Record is not maintained by this agency
- _____ Record of which this agency is legal custodian cannot be found
- _____ Other (specify) _____

Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Supervisor of the Town of Stony Point, 74 East Main Street, Stony Point, NY 10980.