



VILLAGE OF WASHINGTONVILLE

9 Fairlawn Drive, Washingtonville, New York 10992 | 845-496-3221

FREEDOM OF INFORMATION LAW (FOIL) **APPLICATION FOR PUBLIC ACCESS TO RECORDS**

To: **Records Access Officer**

Name of Agency/Dept: _____

I hereby apply to inspect/obtain copies of the following record(s):

NOTE: A fee of 25 cents per copy will be charged for all copies requested. Fees for documents larger than 9"x14" (reproduced by a private contractor), data files (discs), and recordings will be charged for the actual cost of reproduction.

Signature: _____ Date: _____

Name: _____ Telephone: _____

Mailing Address: _____

For Agency Use Only

Approved: _____

Denied: (For the reason(s) checked below)

_____ Confidential Disclosure

_____ Part of Investigatory Files

_____ Unwarranted Invasion of Personal Privacy

_____ Records of which this Agency is Legal Custodian and cannot be found

_____ Exempted by Statute other than the Freedom of Information Law

_____ Other (specify) _____

Signature: _____ **Title:** _____ **Date:** _____

NOTE: You have a right to appeal a denial of this application to the head of the agency.

Name: _____ Business Address: _____

Who must fully explain the reason(s) for such denial within seven days of receipt of an appeal.

I hereby appeal this application.

Signature: _____ Date: _____

OFFICE USE ONLY

Date Received: _____ Received By: _____

Certificate of Liability Insurance Included: Yes _____ Copy of Form Returned to Applicant: Yes _____

Returned Application to Mayor: Yes _____ Returned Application Village Clerk: Yes _____

Revised Date: August 5, 2024