

TOWN OF NORTH EAST
19 N. Maple Ave, P.O. Box 516
Millerton, NY 12546
Phone: 518-789-3300, Fax: 518-789-3399
Email: Townclerk@TownofNorthEastNY.gov

FREEDOM OF INFORMATION LAW

REQUEST FOR ACCESS TO PUBLIC RECORDS

DATE: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

COMPANY (IF APPLICABLE): _____

DEAR TOWN OF NORTH EAST FOIL OFFICER:

UNDER THE PROVISION OF THE NEW YORK STATE FREEDOM OF INFORMATION LAW, THE ABOVE NAMED HEREBY REQUESTS INFORMATION AND /OR COPIES OF RECORDS OR PORTIONS THEREOF PERTAINING TO THE FOLLOWING:

IF THERE ARE ANY FEES FOR COPYING THE RECORDS REQUESTED, THE APPROPRIATE TOWN DEPARTMENT WILL NOTIFY ME.

I UNDERSTAND THE FREEDOM OF INFORMATION LAW REQUIRES THE FOIL OFFICER OF THE TOWN TO RESPOND TO THIS REQUEST WITHIN FIVE BUSINESS DAY AFTER RECEIPT OF THE REQUEST. THE RESPONSE WILL INDICATE WHETHER THE REQUEST IS DENIED OR GRANTED AND THE TIME FRAME WHEN THE INFORMATION WILL BE AVAILABLE.

SINCERELY,

RECEIVED: _____ DEPARTMENT: _____
GRANTED: _____ INFORMATION AVAILABLE: _____
DENIED: _____