

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

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: _____