

REQUEST FOR INFORMATION
Freedom of Information Law

Town Use Only
_____ # of copies
\$_____ Amount

To: Town Clerk, Town of Hunter
PO Box 70 Tannersville, NY 12485

I HEREBY APPLY: (check one)

_____ To inspect the following records:

_____ For copies of the following records at a cost of \$.25 per page:

Records Description:

I understand that the Town of Hunter has five (5) days to act on this request, and if approved, an additional ten (10) days to provide the requested material.

_____	_____
Printed Name	Address
_____	_____
Signature	City, State, Zip
_____	_____
Email Address	Contact phone #

TOWN USE ONLY		
Date received: _____	APPROVED _____	DENIED _____ for the reason(s) checked below
_____ Confidential Disclosure		_____ Part of Investigatory Files
_____ Unwarranted Invasion of Personal Privacy		_____ Exempted by Statute Other than FOIL
_____ Other (specify) _____		
_____	_____	_____
Signature	Title	Date

NOTICE: Should your request be denied, you have thirty (30) days in which to file an appeal with the Records Access Officer of the Town of Hunter, who must fully explain his/her reasons for such denial in writing within seven (7) days of receipt of an appeal.