VILLAGE OF LIBERTY APPLICATION FOR ACCESS TO PUBLIC RECORDS

Instructions:

Please print all information and return this form to: Records Access Officer Village of Liberty 167 North Main Street Liberty, NY 12754

| For Village Use Only: | |
|-----------------------|--|
| Date received: | |
| Received by: | |
| Copy to: | |
| # of pages: | |
| Amount paid: | |

I hereby apply to inspect the following records: (*Provide as much specific detail as possible & note that copies are .25 ¢ per page*)

| Name: | Phone Number: |
|-----------------|---------------|
| Street Address: | Representing: |
| City/State/Zip: | Signature: |

Please be aware that New York State Freedom of Information Law allows a municipality up to five days to respond to a request for records. Some responses, due to their volume or depth of research, will take longer than the five days of allotted time.

Information below this line is to be completed by Village of Liberty Personnel

| Request Approved | |
|---|---|
| Request Denied | |
| Confidential disclosure | |
| Exempted by statute other than FOIL | |
| Record of which this agency is legal custodian cannot be found | |
| Record sealed or pending investigation | |
| Record is not maintained by the Village | |
| Unwarranted invasion of personal privacy | |
| Other: | |
| | |
| | |
| | |
| Signature: Title: Date: | |
| Notice: You have the right to appeal a denial of this application by returning this form w days to the Office of the Mayor at 167 North Main Street Liberty, NY 12754. You m provided with a response to your appeal within seven working days. | • |