



TOWN OF UNION VALE

FOIL REQUEST FORM

249 Duncan Road LaGrangeville, NY 12540

Phone (845) 724-5600 Fax (845) 724- 3757

TO: RECORDS ACCESS OFFICER

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD (S)

Owner Name: _____

Property Address: _____

Building File- Parcel # or Grid # _____

Assessors Property File - Parcel # or Grid # _____

Other Record: (please describe)

Signature

Date

Representing

Phone Number

Email Address (please write clearly)

Fax Number

Mailing Address

*There is no charge for the inspection of documents; however, if duplication is requested by you, a charge of 25¢ per page is payable to Town of Union Vale.

(FOR AGENCY USE, ONLY)

APPROVED _____

DENIED FOR REASON STATED:

Signature Title Date