

# APPLICATION FOR PUBLIC ACCESS TO RECORDS

Note: FOIL requests may be submitted online at <http://www.rvcny.us/rvcfoil.page>

**TO: RECORDS ACCESS OFFICER    DATE:**

**I hereby request "\*\*\*\*\*"the following records:**

**FOR OFFICE USE ONLY:**

**If Copies of records are purchased:  
(\$0.25 per page up to 8 ½ x 14; actual  
cost for larger documents)  
(\$2.00 pp for Certified Copies)**

**No. of Copies:** \_\_\_\_\_

No. of Pages: \_\_\_\_\_

**Charges:** \_\_\_\_\_

**Payment:** \_\_\_\_\_

Receipt No. \_\_\_\_\_

Date: \_\_\_\_\_

NAME  
PRINT CLEARLY:

SIGNATURE:

REPRESENTING:

MAILING ADDRESS  
WITH ZIP CODE:

Email address:

PHONE NUMBER:

\*\*\*\*\*FOR AGENCY USE ONLY\*\*\*\*\*

Available?      Yes \_\_\_\_\_ No \_\_\_\_\_

Department Head \_\_\_\_\_

APPROVED?	Yes	No
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**DENIED (for the reason(s) checked below):**

☐ Disclosure would endanger life or safety.  
☐ Unwarranted Invasion of Personal Privacy [Public Officers 89(2)]  
☐ Record Cannot be Found.  
☐ Record is not Maintained by This Agency.  
☐ Exempted by Statute Other than the Freedom of Information Act.  
☐ Other (specify) \_\_\_\_\_

VILLAGE ATTORNEY:

*Village Attorney*

Date \_\_\_\_\_