

# TOWN OF RICHMONDVILLE

Richmondville, NY 12149

Records Access Officer  
Town of Richmondville  
PO Box 39  
Richmondville, NY 12149

## RE: Freedom Of Information Law (FOIL) Requesting

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

Dear Records Access Officer:

Under the provision of the NY Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

(Identify the records in which you're interested clearly and definitively).

I understand there is a .25 per page copy fee for the records requested, please supply the records without informing me if the fees are not in excess of \$\_\_\_\_\_.

The Freedom of Information Law requires that an agency respond to a request within five business days of receipt of request. If for any reason my request is denied, please inform me of the reason for the denial in writing and provide the name and address of the person or body to whom an appeal should be directed.

Sincerely,

\_\_\_\_\_(Signature)

\_\_\_\_\_ Name

\_\_\_\_\_ Phone Number

\_\_\_\_\_ Address

\_\_\_\_\_ City, State, Zip Code