

REQUEST FOR ACCESS TO PUBLIC RECORDS

**VILLAGE OF COBLESKILL
OFFICE OF RECORDS ACCESS OFFICER**

Ms. Samantha Moyster
Village Clerk/Treasurer
378 Mineral Springs Road, Suite 2
Cobleskill, New York 12043
(518) 234-3891

Dated: _____

Request by: _____ Tel. no.: _____

Address: _____

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to (attempt to identify the records in which you are interested as clearly as possible):

FOIL Request: _____

If there are any fees for copying the records as requested, please inform me before filling the request.

FEES: Twenty-five cents (\$.25) x _____ pages = \$_____ payable by cash or by check to: Village of Cobleskill (Special charges may apply to irregular size documents, tapes or records in irregular formats.)

Copies wanted: [] Yes [] No

The Freedom of Information Law requires that an agency respond to a request within five business days of receipt of a request. If for any reason any portion of my request is denied, please inform me of the reasons for the denial in writing.

Sincerely,

Signature of Requestor