

TOWN OF ROYALTON

5316 Royalton Center Road, Middleport, NY 14105

Phone: (716) 772-2431 Fax: (716) 772-2748

APPLICATION FOR PUBLIC ACCESS TO RECORDS

Date: _____

To: **RECORDS ACCESS OFFICER**

I wish to inspect the following record(s): (Please identify records you are interested in as clearly as possible.)

You may inspect documents first and then ask for copies of the ones you actually want.

Number of copies requested (\$.25 per copy) _____

Signature: _____

Printed Name: _____

Address: _____

City/State/Zip: _____

Daytime Phone: _____

FOR AGENCY USE ONLY

APPROVED Date: _____

Time: _____

Photocopies: # of Copies: _____

Charge: _____

DENIED (For the reason(s) checked below)

- ____ Exempted by statute other than Freedom of Information
____ Unwarranted invasion of personal privacy
____ Would impair contract awards or collective bargaining agreements
____ Trade secret; confidential commercial information
____ Law Enforcement records
____ Would endanger the life or safety of any person
____ Interagency or intra-agency materials
____ Record not maintained by this agency
____ Record of which this agency is legal custodian cannot be found
____ Other (specify) _____

Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Town of Royalton Attorney, Thomas H. Brandt, 929 Lincoln Avenue, Lockport, NY 14094.



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5316 Royalton Center Road
Middleport, New York 14105

www.townofroyalton.org

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"I, _____, hereby certify that the records received in response to my
Freedom of Information Law (Public Officers Law §84-90) request dated _____ will
not be used for purposes of solicitation or fund-raising, and said records will not be sold, given
or otherwise made available to any other person for the purpose of allowing such person to use
said records for solicitation or fundraising purposes."

Signature

Date

Notary

Date