

VILLAGE OF RUSHVILLE

Application for Access to Public Records

To: Records Access Officer
Village of Rushville
1 South Main Street
PO Box 51
Rushville, NY 14544

I hereby apply to inspect the following record(s):

Print Name

Signature

Representing

Mailing Address

For Office Use Only

_____ Approved

_____ Denied (for the reason checked below)

_____ Confidential Disclosure

_____ Unwarranted Invasion of Personal Privacy

_____ Record of Which this Agency is Legal Custodian Cannot be Found

_____ Record is not the Village of Rushville

_____ Exempted by Statute Other than the Freedom of Information Act

_____ Part of Investigatory Files

_____ Other (specify)_____

Signature

Title

Date

NOTICE: You have a right to appeal a denial of this application and receive an explanation for such denial in writing within seven days of your filing such appeal.

All FOIL requests that require photocopying, the cost will be as follows:

\$.15/each copy

Fee due: _____