

**CITY OF GLENS FALLS
APPLICATION FOR PUBLIC ACCESS TO RECORDS
Freedom of Information Law (FOIL) Request Form**

I HEREBY APPLY TO INSPECT/OBTAIN COPIES OF THE FOLLOWING RECORDS:

Signature

Date

Print Name

Phone Number

Mailing Address

Copy fee: 25 cents per page

FOR AGENCY USE ONLY

APPROVED _____

DENIED (for the reason(s) checked below)

- _____ Confidential Disclosure _____ Part of Investigators Files
- _____ Unwarranted Invasion of Personal Privacy
- _____ Records of Which This Agency is Legal Custodian Cannot be Found
- _____ Record is Not Maintained by This Agency
- _____ Exempted by Statute Other Than the Freedom of Information Act
- _____ Other (Specify) _____

Signature

Title

Date

NOTICE: You have a right to appeal a denial of this application to the head of this Agency:

Name

Business Address

Date

Who must fully explain there reasons for such denial in writing seven days of receipt of an appeal.

I Hereby Appeal:
