VILLAGE OF BATH

FOIL REQUEST

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request a copy of records or portions thereof pertaining to, or containing the following. (identify/describe the records and provide all relevant information and include dates of records if possible).

I understand there is a fee of $.25 per page for duplication of the records requested. (OPTIONAL: If the fee exceeds $20.00, please contact me before duplicating the records.)

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 this request is denied, you will be informed of the reasons for the denial in writing and provided the name and address of the person or body to whom an appeal should be directed.

Applicant:_____ _____
Print Sign

Address to mail request/response:

Phone in case any questions arise:

Sincerely,

Winona Flynn

Village Clerk/Treasurer

nflynn@villageofbath.org

607-776-3811

607-776-5025 (fax)