TOWN OF NEW ALBION

14 Main Street Cattaraugus, NY 14719 Phone: (716) 257-3661 Fax: (716) 257-3270

APPLICATION FOR PUBLIC ACCESS TO RECORDS

Date:_			
TO: R	ose M. LaQuay, Records Access Officer		
I wish to inspect the following record(s). (Identify records you are interested in as clearly as possible.)			
You m	hay inspect documents first and then ask for copies of copies requested: (.25/copy)	f the ones you actually want.	
Signat	ure:		
Printed	l Name:		
Addres	ss:tate/Zip:		
,			
	FOR ACE	NCY USE ONLY	
		NOT OBLICADI	
	OVED	Time	
Date:Photocopies:		Time: Charge:	- 0
DENI	ED (For the reason(s) checked below)		
	Exempted by statute other than Freedom of Infor	mation	
	Unwarranted invasion of personal privacy		
	Would impair contract awards or collective bargaining agreements		
	Trade secret; confidential commercial informatio	on	
	Law enforcement records		
	Would endanger the life or safety of any person		
	Interagency or intra-agency materials		
	Record is not maintained by this agency		
	Record of which this agency is legal custodian cannot be found		
	Other		

Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Supervisor of the Town of New Albion, 14 Main Street, Cattaraugus, NY 14719.

6/2009