

**“Freedom of Information: Request Letter”**

Town of Ellicott  
215 S. Work St.  
Falconer, NY 14733

Dear Records Management Officer:

Under the provisions of the New York Freedom of Information Law (FOIL), Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to:

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*(attempt to identify the records in which you are interested as clearly as possible on the attached Request Form).*

I am aware that the Town charges 25 cents (\$0.25) per copy. Please inform me of the total cost before any copies are made (or supply the records without informing me if the fees are not in excess of \$ \_\_\_\_\_).

As you know, the Freedom of Information Law requires that an agency respond to a request within five (5) business days of receiving the request. Therefore, I would appreciate a response within that timeframe.

Sincerely,

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(Written Signature)

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(Printed Name)

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(Address)

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City                      State                      Zip Code

**REQUEST FOR COPY OF RECORDS IN THE TOWN OF ELLICOTT**

To: Records Management Officer  
Town of Ellicott Town Clerk  
215 S Work St, Falconer NY 14733

Description of record requested (please print):

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.....  
**FOR AGENCY USE ONLY**

**APPROVED** \_\_\_\_\_

\_\_\_\_\_  
Signature

RECORDS OFFICER Date: \_\_\_\_\_

Records Received by \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

.....  
**DENIED** \_\_\_\_\_

Reason Denied \_\_\_\_\_

\_\_\_\_\_  
Signature

Records Officer Date: \_\_\_\_\_

.....  
**NOTICE:** you have a right to appeal a denial of this application to the head of the agency who must explain his reasons for such denial in writing, within ten days of receipt of an appeal.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
I HEARBY APPEAL ON THE FOLLOWING GROUNDS: