

Please submit this form to Carol A. Booth, Freedom of Information Officer

**VILLAGE OF TARRYTOWN
FREEDOM OF INFORMATION REQUEST (FOIL)**

A maximum fee of \$0.25 per page will be charged for copies if unbound. A proportionate fee will be charged for other copies.

I hereby apply to inspect the following record(s) of _____
(name of department)

Name: _____ Representing: _____

Mailing Address: _____ Email Address: _____

Signature: _____ Date _____ Telephone No. _____

Approved: _____

Denied: _____ (for reason(s) checked below)

_____ Confidential disclosure

_____ Part of investigatory file

_____ Unwarranted invasion of personal privacy

_____ After diligent search, record: cannot be found

_____ Record does not exist

_____ Record is not maintained by this agency

_____ Exempted under Freedom of Information Act

_____ Exempted by statute or case law

Signature: _____
(Freedom of Information Officer)

Date: _____

Note: You have the right to appeal a denial of this application to the Village Attorney who must fully explain his/her reasons for support of such denial in writing.

I hereby request an appeal: _____
(signature)

Date: _____