

FREEDOM OF INFORMATION LAW (FOIL) REQUEST

No. _____

TO: TOWN/VILLAGE OF HARRISON - TOWN CLERK JGREER@HARRISON-NY.GOV

NAME: (Print) _____ TELEPHONE: _____

ADDRESS: _____

E-MAIL: _____

I hereby request to examine the following records: Description of Record:

From: _____ Law _____ Building _____ Comptroller _____ Assessor
_____ Town Clerk _____ Planning _____ Tax _____ Engineering
_____ Public Works _____ Zoning _____ Police _____ Fire

Relating to: Block _____ Lot(s) _____ Property Address: _____*PHOTOCOPIES OF DOCUMENTS COST \$.25 PER PAGE. COST FOR REPRODUCTIONS OF PLANS WILL VARY.***I** _____ / **want to have copies of the records made and agree to pay for them.** Fee: \$ _____**I** _____ / **do not want to have copies of the records made.**

Date: _____ Signature: _____

WARNING: Examination of these records is covered by New York State Penal Law.**§175.20 Tampering with Public Records in the 2nd Degree is a Class A Misdemeanor****§175.24 Tampering with Public Records in the 1st Degree is a Class D Felony**

Received by Town Clerk _____ L/D _____

Pursuant to Public Officers Law Article 6

Your request will be reviewed. Within five business days of the receipt of your request for a record reasonably described, the Town will either make such record available, deny the request in writing, or furnish a statement of the approximate date when such request will be granted or denied.

If copies are requested, they will be made available after payment of the appropriate fee.