

TOWN OF LIBERTY

TOWN CLERK'S OFFICE

120 North Main Street, Liberty, NY 12754

Phone (845) 292-5110 Fax (845) 292-1310

REQUEST FOR PUBLIC RECORDS

FOR OFFICE USE ONLY

Date _____

Name: _____

Address: _____

Phone (_____) _____

Representing: _____

Please specify:

- Property location (Street address, or section, block and lot number)
- Department you are requesting records from
- Describe information requested as fully as possible

of photocopies @ .25 per copy \$ _____ Additional Charges \$ _____

Signature

Date

The Freedom of Information Law requires that an agency respond to a request within five business days of receipt of a request.

You have a right to appeal a denial of this application to the Supervisor of the Town of Liberty within 30 days after the date of the denial.