

Town of Knox
2192 Berne Altamont Road
P.O. Box 116
Knox, NY 12107

FREEDOM OF INFORMATION REQUEST

Date: _____

To: Kimberly Swain, Records Management Officer
Identify records you are interested in as clearly as possible.

You may inspect documents first and then ask for copies of the ones you actually want.

Number of copies requested: (.25 per copy) _____

Map copies - cost of reproduction _____

Signature: _____

Printed Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

FOR AGENCY USE ONLY

APPROVED

Date _____ Time _____

Photocopies: Number _____ Charge _____

DENIED (for the reason(s) checked below)

- G Exempted by statute other than Freedom of information
- G Unwarranted invasion of personal privacy
- G Would impair contract awards or collective bargaining agreements
- G Trade secret; confidential commercial information
- G Law enforcement records
- G Would endanger the life or safety of any person
- G Interagency or intra-agency materials
- G Records is not maintained by this agency
- G Record of which this agency is legal custodian cannot be found
- G Other (specify) _____

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 Knox, P.O. Box 116, Knox, NY 12107.