

**Application for Public Access to Records**

To: Records Access Officer

**Town of Clay  
4483 Route 31  
Clay, New York 13041**

I hereby apply to inspect the following records:

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Representing

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Mailing address

\_\_\_\_\_

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**For Agency use only**

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_ [for the reason(s) checked below]

- \_\_\_\_ Confidential Disclosure
- \_\_\_\_ Part of Investigatory Files
- \_\_\_\_ Unwarranted Invasion of Personal Privacy
- \_\_\_\_ Record of which this Agency is Legal Custodian Cannot be Found
- \_\_\_\_ Record is not Maintained by this Agency
- \_\_\_\_ Exempted by Statute other than the Freedom of Information Act
- \_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

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**NOTICE:** You have a right to appeal a denial of this application to the head of this agency who must fully explain his/her reasons for such denial in writing seven day of receipt of an appeal.

I hereby appeal:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date