

APPLICATION FOR PUBLIC ACCESS
TO RECORDS
(ALSO FOR APPEAL USE)

TO: RECORDS ACCESS OFFICER

TOWN OF WEST SENECA
(Name of Agency)

1250 UNION ROAD, WEST SENECA, NEW YORK 14224
(Address)

I HEREBY APPLY TO: 1) Inspect ()
2) Obtain a copy of the
Following records: ()

STATE REASON _____

(Signature)

(Date)

(Representing)

(Mailing Address)

Telephone No.

FOR AGENCY USE ONLY

- Approved ()
- Denied () Confidential Disclosure
- () Part of Investigatory Files
- () Unwarranted Invasion of Personal Privacy
- () Record of Which this Agency is Legal Custodian
Cannot be found
- () Record is Maintained by this Agency
- () Exempted by Statute other than the Freedom of
Information Law
- () Other (Specify) _____

(Signature)

(Date)

(Title)