Town of Avon, New York

Freedom of Information Law (FOIL) Request Form

Records Access Officer: Town Clerk Faye Beshures | **Email:** townclerk@avon-ny.gov

Submit this request by email with the subject line *"FOIL Request"*. Complete only the sections applicable to your request.

1. Records requested (include dates, descriptions, names, etc.):

2. Records requested for in-person inspection (if applicable):

3. Cost estimate or format limitations (if applicable):

Preferred contact phone number: _____

If any portion of this request is denied, written reasons and appeal instructions will be provided in accordance with New York State Public Officers Law Article 6.

Certification / Disclaimer
By submitting this request, you certify that the information obtained will not be used to constitute an unwarranted invasion of personal privacy and you agree to indemnify and hold the Town of Avon harmless from any claim arising from such use.

☐ I Agree ☐ I Disagree

Name: _____

Mailing Address (if records are to be mailed):

_____

_____

_____