Village of Baldwinsville
Police Department

Freedom of Information Law
Request for Records

Instructions

- All requests must be made in writing. Please use this form to assist you in structuring your request.
- Within five (5) business days this agency will respond to your request for records with a written acknowledgement of receipt, and a statement of the approximate time frame required to respond to your request.
- All applicable preparation and/or reproduction fees must be collected before any legally releasable record(s) are provided. Paper records are $0.25 per page, video records are $5.00 per DVD, $10 per thumb drive, and a minimum of $125 per hour for outside professional video redaction, if required.
- Submit completed form by email or mail to:

Email Address:
policerecords@baldwinsville.gov

*For email submission, save this completed form locally to your computer and attach the saved copy to your email.

Mailing Address:
Village of Baldwinsville Police Department
Attn: Records Access Officer
16 W. Genesee Street
Baldwinsville, NY 13027

Requestor Information

Date (mm/dd/yyyy)	Prefix	Name (Last, First, MI)	Suffix	Phone #

Mailing Address	City	State	Zip

Person You Represent (Last, First, MI)

Your Firm/Organization Name (if applicable)	Phone #

Firm/Organization Address	City	State	Zip

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Record Information

Identify or describe the government record(s) sought with detailed information to assist this agency in locating the record(s)

Incident # (if available)	**Incident Type**	**Incident Date** (mm/dd/yyyy)	**Incident Time** (am/pm)

Incident Location

Name of Involved Individual(s) (Last, First, MI)	**DOB** (mm/dd/yyyy)

Briefly Provide Other Descriptive Information on Record(s) Sought: