

F.O.I.L

FREEDOM OF INFORMATION LAW APPLICATION FOR PUBLIC ACCESS TO RECORDS TOWN OF DUNKIRK

Name: _____ Telephone: _____

Representing : _____

Mailing Address: _____

I hereby apply to inspect the following records:

Signature

**I agree to pay the statutory fee of .25 per page for all documents covered by this request.
However, if the total cost of filing this request exceeds twenty-five (25.00) dollars, I would like to be
contacted prior to copies being made.**

Signature

DATE

FOR AGENCY USE ONLY

APPROVED ☐

DENIED for the reason(s) checked below

- ☐ Confidential Disclosure
- ☐ Unwanted 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

Signature

TITLE

DATE