

Village of Head of the Harbor

Freedom of Information Act Request (F.O.I.A.)

Records Access Officer 500 North Country Rd. St. James, NY 11780 Tel.: (631) 584-5550 Fax: (631) 862 - 1417

## APPLICATION FOR PUBLIC ACCESS TO RECORDS

PLEASE TYPE OR PRINT CLEARLY

SECTION 1 – TO BE COMPLETED BY APPLICANT		
I HEREBY APPLY TO REVIEW OR COPY THE RECORD(S) DESCRIBED BELOW. (ONLY ONE SUBJECT MATTER / REQUEST PER FORM.)		
Name of Applicant	Name of Client Represented	
Business Firm	Street Address of Applicant / Business Firm	
Telephone & Fax Numbers	City	State Zip Code
E-Mail Address	Signature of Applicant / Date of Application	
DESCRIPTION OF RECORDS SOUGHT: Please describe the records sought in specific detail. For documents relating to properties, please include the Suffolk County Tax Map number &/or street address. NOTE: Under the Freedom of Information Law, the Village of Head of the Harbor is not required to create a new record.		
PLEASE INDICATE: I desire:  to inspect the records. I desire:  cop	cost of copies of do	roduction is \$.25 per page or standard cuments in excess of 8-1/2" x 14" in ed charges for document conveyance.
SECTION 2 – TO BE COMPLETED BY AGENCY FREEDOM OF INFO	RMATION OFFICER	
This letter serves to acknowledge the Village's receipt of your FOIL request datedreceived in this office  A determination regarding the grant or denial of your request will be made within twenty business days from the date of this acknowledgment.  A copy of this form / other acknowledgement letter (circle one) is being hand delivered / mailed / e-mailed / faxed (circle one) to you to		
indicate receipt of your request. PLEASE NOTE: The Freedom of Information Law requires that a municipality respond to this original request within five (5) business days.  THERE IS NO SPECIFIC TIME LIMIT, HOWEVER, AS TO THE TIME TO PRODUCE THE DOCUMENTS.		
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