

APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: Tracy Chamberlain, City Clerk
City Clerk/Information Officer
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Salamanca, NY 14779

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PLEASE WRITE LEGIBLY OR REQUEST WILL BE DECLINED.

I hereby apply to access the following record:

Dates of records requested: _____

_____ I hereby request to inspect the record. (Note: Accessible records are available for inspection by the public during regular business hours.)

_____ I hereby request a copy of the record, for which I agree to pay \$.25 per page.

Name

Signature of Applicant

Address

Date of Request

Relation to requested information

Phone

NOTE: FOIL requires that within five business days of receiving a written request for a record reasonably described, the agency must make such records available to the person requesting it, deny such request in writing or furnish a written acknowledgment of the receipt of the request and a statement of the approximate date when the request will be granted or denied.

Date received by Information Officer for the City of Salamanca: _____

Tracy Chamberlain, City Clerk/Information Officer