

Wellsville Police Department

46 South Main Street * Wellsville, New York 14895

Phone: (585) 593-5600 * FAX: (585) 593-1556

Application for Public Access to Records

To the Wellsville Police Department:

I hereby request to receive the following records:

I certify that the information requested will not be utilized in a manner tending to constitute an unwarranted invasion of personal privacy as same is defined and delineated by the terms and provisions of Article 6 (Freedom of Information Law) of the Public Officers Law of New York State and I further agree to indemnify and hold the Village of Wellsville, New York harmless from any claim arising from any such unsanctioned use of the information requested. **I understand that the minimum fee is \$.25 fee for each page requested.**

Print Name

Date & Time

Signature

Mailing Address

Telephone #

Yes _____ No _____
Copies Requested?

For Department Use Only

Approved:

Denied:
(check one)

Confidential Disclosure
Part of Investigatory Files
Unwarranted Invasion of Personal Property
Record of which this agency is legal custodian cannot be found
Record is not maintained by this department
Exempted by statute other than Freedom of Information Act
Other

Records Access Officer, Title

Date:

Notice: The records access officer has five days to approve or deny this request. You have a right to appeal a denial within 30 days of the denial. Records are available during the business hours of 8:30 a.m. – 4:00 p.m.

Date Received: