

APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: TOWN OF QUEENSBURY
RECORDS ACCESS OFFICE
742 BAY ROAD
QUEENSBURY, N.Y. 12804

I, hereby apply to inspect the following records:

EXPLAIN PURPOSE:

APPLICANTS NAME: _____

MAILING ADDRESS: _____

AGENCY USE

APPROVED _____

DENIED _____

Record of which this agency is legal Custodian cannot be found:

Signature/Title _____

Date: _____

NOTICE: You have a right to appeal a denial of this application to the Head of the Agency, who must fully explain his reasons for such denial in writing seven days of receipt of an appeal.

I hereby appeal: _____
Signature