



Town of Victor  
85 East Main Street  
Victor, NY 14564  
585-742-5080  
Fax 585-924-0202

APPLICATION FOR PUBLIC ACCESS TO RECORDS  
FREEDOM OF INFORMATION LAW

TO: Records Access Officer

Date of request: \_\_\_\_\_

I hereby apply to:  Inspect  Obtain Copies of the following record(s):

If request pertains to property, please complete the following:

Residential

Address of Request: \_\_\_\_\_

Commercial

(Specifics) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Within five (5) business days of the request: the record(s) will be available; OR written acknowledgment of the request and a statement of the approximate date the requested information will be available or denied; OR an explanation of denial in writing.

- There is a \$.25 copying charge for standard copies made. Additional charges apply for large documents (actual cost of reproduction), tapes, cd's, or photographs.

- Records may be inspected, picked up in person, or mailed to applicant. If mailed, postage will be charged.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name – Please Print*

\_\_\_\_\_  
*Mailing Address*

\_\_\_\_\_  
*Representing (if applicable)*

\_\_\_\_\_  
*Email address*

\_\_\_\_\_  
*Phone number*

**OFFICE USE ONLY**

**Approved**

- Confidential Disclosure
- Part of Investigatory Files
- Record not maintained by this Agency
- Other \_\_\_\_\_

**Denied, for reason(s) checked below:**

- Exempted by Statute other than Freedom of Information Act
- Record of which this Agency is Legal Custodian cannot be located
- Unwarranted Invasion of Personal Privacy

Records Access Officer: \_\_\_\_\_

Date: \_\_\_\_\_

Task Time: \_\_\_\_\_

Cost: \_\_\_\_\_