

Lackawanna Public Library

FREEDOM OF INFORMATION LAW (FOIL)

APPLICATION FOR PUBLIC ACCESS TO RECORDS

This form is for application to the Lackawanna Public Library.

MAIL TO:

Director - FOIL Records Access Officer
Lackawanna Public Library
506 Ridge Rd
Lackawanna, NY 14218

I hereby apply to (1) inspect (____) OR (2) obtain a copy of (____) the following record: (Check one)

Signature

Date

Print Name

Telephone

Representing e-mail

Mailing Address

FOR AGENCY USE ONLY

Approved (____)

Denied (for the reason(s) checked below)

Confidential disclosure

Part of investigatory files

Unwarranted invasion of personal privacy

Record of which the B&ECPL is legal custodian cannot be found

Record is not maintained by the B&ECPL

Exempted by statute other than the Freedom of Information Act

Other (Specify) _____

Signature

Title

Received by Date

LACKAWANNA PUBLIC LIBRARY
FREEDOM OF INFORMATION LAW (FOIL)
APPEAL REQUEST FORM

This form is for application to the Lackawanna Public Library.

MAIL TO:

President, Library Board of Trustees - FOIL Appeals Officer
Lackawanna Library
506 Ridge Rd
Lackawanna, NY 14218

I hereby appeal:

Signature Date

_____ () _____

Print Name Telephone

Representing e-mail

Mailing Address

Date of Original Request: _____

Records Requested: _____

Reason Provided for Denial: _____

FOR AGENCY USE ONLY

Denial Upheld ()

Signature: _____

Denial Reversed ()

Title: _____

Date: _____