



TOWN OF CLARENCE

ONE TOWN PLACE, CLARENCE, NEW YORK 14031

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Janel A. Farolino
Deputy Town Clerk

Karen E. Lang
Town Clerk

Rachel M. Guadagno
2nd Deputy Town Clerk

APPLICATION FOR PUBLIC ACCESS TO RECORDS

To: CLARENCE TOWN CLERK/RECORDS ACCESS OFFICER

From:

Name of Agency

Address

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD:

Signature

Date

Representing

Mailing Address

Phone No.

For Agency Use Only

Approved _____

Fee _____

Denied (for the reason (s) checked below)

____ **Confidential disclosure**
____ **Unwarranted Invasion of Personal Privacy**
____ **Record of which this agency is Legal Custodian cannot be found**
____ **Record is not maintained by this Agency**
____ **Exempted by statute other than the Freedom of Information Act**
____ **Other (specify)** _____

Signature

Title

Date

NOTICE: PERSONS DENIED ACCESS TO RECORDS MAY APPEAL SUCH DENIAL IN WRITING WITHIN 30 DAYS TO THE APPEALS OFFICER-CLARENCE TOWN SUPERVISOR, WHO MUST FULLY EXPLAIN REASONS FOR SUCH DENIAL IN WRITING WITHIN 10 WORKING DAYS OF RECEIPT OF AN APPEAL.