



# Town of Hancock Application for Public Access to Records

Please complete all applicable information, being as explicit as possible, unless there is an attached letter specifically detailing your request.

I HEREBY REQUEST TO INSPECT TOWN OF HANCOCK \_\_\_\_\_ RECORDS:  
(Please be specific)

I request to see the following records:  I request a copy of the following records:  Please refer to attached letter:

\_\_\_\_\_  
\_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

**FOR AGENCY USE ONLY:** \_\_\_\_\_ Date Received: \_\_\_\_\_

Approved  Approved with Deletions (see below)  Denied (see below)  Record does not exist in Dept. Files

**Records Deleted or Denied as per: Public Officers Law, Section 87 (2).**

- 1.) Exempted by State or Federal statute
- 2.) Unwarranted invasion of personal privacy
- 3.) Would impair present/imminent contract awards or collective bargaining negotiations
- 4.) Are trade secrets
- 5.) Compiled for law enforcement purposes which would:
  - a. Interfere with law enforcement investigations or judicial proceedings
  - b. Deprive a person of a right to a fair trial or impartial adjudication
  - c. Identify a confidential source or disclose confidential information relative to a criminal investigation
  - d. Reveal criminal investigative techniques/procedures
- 6.) Would endanger the life or safety of any person
- 7.) Are inter-agency or intra-agency communication
- 8.) Other:

\_\_\_\_\_  
Signature Title Date

NOTICE TO APPLICANT: You have the right to appeal a denial of this application to Supervisor of the Town of Hancock, 661 West Main Street, Hancock, NY 13783. The Supervisor will explain the reasons for such denial in writing within 10 business days of an appeal.

I HEREBY APPEAL:

Signature of Applicant \_\_\_\_\_ Date of Appeal Request \_\_\_\_\_