

**FREEDOM OF INFORMATION LAW (F.O.I.L.) REQUEST FORM**  
**APPLICATION FOR PUBLIC ACCESS TO RECORDS**

**TO:** RECORDS ACCESS OFFICER, CITY OF ONEIDA

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD:

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Signature \_\_\_\_\_ Print Name: \_\_\_\_\_

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

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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**FOR AGENCY USE ONLY**

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

DENIED FOR 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 the Agency
- Exempted by Statute other than the Freedom of Information Act
- Part of investigatory files
- Other (specify) \_\_\_\_\_

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

NOTICE: You have a right to appeal a denial of this application to the head of this Agency.

\_\_\_\_\_  
Name \_\_\_\_\_ Address