

# APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: RECORDS ACCESS OFFICER  
Otsego County  
197 Main Street  
Cooperstown, NY 13326-1129

I hereby apply (to inspect/for a copy of) the following record(s):

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

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## FOR AGENCY USE ONLY

Approved :

Denied (for the reason(s) checked below)

- Exempted by State or Federal Statute
- Unwarranted Invasion of Personal Privacy
- Would Impair Contract Negotiations
- Compiled for Law Enforcement Purposes
- Would Endanger Life or Safety of Individual
- Inter-agency or Intra-agency Communications
- Confidential Disclosure
- Record Cannot be Found
- Record is Not Maintained by This Agency
- Other \_\_\_\_\_

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

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## NOTICE - YOU HAVE A RIGHT TO APPEAL A DENIAL OF THIS APPLICATION TO:

Kathleen Clark, Chair

Otsego County Board of Representatives  
197 Main Street, Cooperstown, NY 13326-1129

Who must either grant approval or fully explain his reasons for such denial in writing within ten business days of receipt of an appeal.

I HEREBY APPEAL THIS DENIAL:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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