



# OTSEGO COUNTY OFFICE OF THE SHERIFF

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RICHARD J. DEVLIN, JR  
SHERIFF



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## Public Records Exemption - FOIL Form FAQ

The NYSAFE Act protects the privacy of pistol license holders by permitting them to notify a County Clerk that they do not wish for their information to be released publicly.

Under the law, current licensees and new applicants may make this notification to their licensing officer using a form approved by the Superintendent of the New York State Police. Your licensing officer is where you applied for your pistol permit, in some Counties it may be the Sheriff's Office or County Clerk Office.

### **Q: Where do I get the FOIL form?**

**A:** The form is also available on our web site <http://www.otsegocounty.com/depts/shf/index.htm> as well as the New York State Police website at [www.troopers.ny.gov/optoutfoil](http://www.troopers.ny.gov/optoutfoil) or the NY SAFE Act website at [www.nysafeact.com](http://www.nysafeact.com).

### **Q: How do I complete the form?**

**A:** In the first section, you will need to fill out your name, date of birth, address and the county in which you are applying.  
If you hold a firearms license, there is a space for you to provide the license number as well.  
In the second section, check the box that best describes the reason your information should not be publicly disclosed.  
To complete the form, sign and date it.

### **Q: Once I've completed the form, how do I submit it?**

**A:** To submit your form, take it the Sheriff's Office where it will be processed and filed with the County Clerks Office.

### **Q: Once the form is completed, how long does it take to become effective?**

**A:** Pistol permit information held by the county is currently exempt from FOIL and will be until May 15, 2013. At that time, those who have submitted the form will remain exempt from the FOIL provisions unless the licensing authority has refused to grant the exemption. Those wishing to apply for the exemption should do so by May 15, 2013, to avoid any disclosure.

### **Q: If I do not file the form by May 15, 2013, will I be able to file in the future?**

**A:** You may file the form anytime. However, after May 15, 2013, if you have not yet filed an exemption form, your information may be subject to release under FOIL.  
If you file a form in the future and your request is granted, your information will once again be exempt from FOIL.

# NYS Firearms License Request for Public Records Exemption

*Pursuant to section 400.00 (5) (b) of the NYS Penal Law*

I am:  **an applicant** for a firearms license  **currently licensed** to possess a firearm in NYS

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Firearms License # (if applicable) \_\_\_\_\_ Date Issued \_\_\_\_\_

Licensing Authority / County of Issuance or Application \_\_\_\_\_

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**I hereby request that any information concerning my firearms license application or firearms license not be a public record.** The grounds for which I believe my information should **NOT** be publicly disclosed are as follows: *(check all that are applicable)*

**1. My life or safety may be endangered by disclosure because:**

- A. I am an active or retired police officer, peace officer, probation officer, parole officer, or corrections officer;
- B. I am a protected person under a currently valid order of protection;
- C. I am or was a witness in a criminal proceeding involving a criminal charge;
- D. I am participating or previously participated as a juror in a criminal proceeding, or am or was a member of a grand jury;

**2. My life or safety or that of my spouse, domestic partner or household member may be endangered by disclosure for some other reason explained below:** *(Must be explained in item 5 below)*

**3. I am a spouse, domestic partner or household member of a person identified in A, B, C or D of question 1.**

*(Please check any that apply)*

A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ D \_\_\_\_\_

**4. I have reason to believe that I may be subject to unwarranted harassment upon disclosure.**

**5.** *(Please provide any additional supportive information as necessary)*

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

**I understand that false statements made herein are punishable as a class A misdemeanor. I further understand that upon discovery that I knowingly provided any false information, I may be subject to criminal penalties and that this request for an exemption shall become null and void.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date