



Chemung County
 Public Information and Records Department
 Phone: (607) 737-2837
 www.chemungcountyny.gov

203 Lake Street
 P.O.Box 588
 Elmira, NY 14902
 Fax: (607) 737-0351

**Application for Access to Records
 Freedom of Information Law (FOIL)**

I do hereby request the following record(s):

Please be as specific as possible. If requesting information on an individual, such as criminal records, please provide the persons date of birth. Copies are subject to a fee of \$0.25 per page.

Name: (please print) _____

Email Address: _____

Mailing Address: _____

Date: _____

City, State, Zip Code: _____

Representing: (if applicable) _____

Signature: _____

Email requests to communications@chemungcountyny.gov or mail to 203 Lake Street P.O. Box 588 Elmira, NY 14902

FOR DEPARTMENTAL USE ONLY

Denial of Access:

I hereby certify that access has been denied to the applicant for the reason(s) checked below:

- Exempt by other statute
- Confidential disclosure
- Part of investigatory files
- Unwarranted invasion of personal privacy
- Not specifically named as available under any statute
- Other _____

You have the right to appeal denial of this application by writing, within thirty (30) days, to the Chemung County Attorney • P.O. Box 588 • Elmira, New York 14902.

Search Certification:

I certify that a proper search has been conducted for the records requested and they cannot be found.

Correctness Certification:

I certify that the copies attached are correct copies of the records requested by the applicant.

 Name: Signature: Title: Date:

Cost of Copies: Number of Pages: _____ Total Cost: _____ Paid by: _____

