



INCORPORATED VILLAGE OF OCEAN BEACH

POST OFFICE BOX 457
OCEAN BEACH, NEW YORK 11770-0457
TEL: (631) 583-5940 FAX: (631) 583-7597
www.villageofoceanbeach.org

TO: FOIL OFFICER

Date Stamp Here

Freedom of Information Law Application (F.O.I.L.) – Application for Access to Public Records

Instructions: Complete the Section 1 and submit to Office of Clerk/Treasurer, 315 Cottage Walk, PO Box 457, Ocean Beach, NY 11770 (fax) 631-583-7597 or email: info@villageofoceanbeach.org

PLEASE TYPE OR PRINT CLEARLY

SECTION 1 – TO BE COMPLETED BY APPLICANT

I HEREBY APPLY TO REVIEW OR COPY THE RECORD (S) DESCRIBED BELOW:

1. NAME OF APPLICANT	5. MAILING ADDRESS (include all important info)		
2. NAME OF BUSINESS FIRM:	6. CITY	7. STATE:	8. ZIP CODE:
3. SIGNATURE OF APPLICANT:	9. DATE OF APPLICATION:		
4. TELEPHONE NUMBER:	10. DEPT. (IF KNOWN):		

DESCRIPTION OF RECORD SOUGHT TO INSPECT AND ANY SPECIAL INSTRUCTIONS. Please describe the record(s) sought in as specific detail as possible with, address, date or time frame, if applicable. If we cannot determine what record(s) you seek your application will be denied. Under the NYS FOIL the Inc. Village of Ocean Beach is only required to supply DOCUMENTS THAT ALREADY EXIST (NYS POL Article 6).

FEE SCHEDULE

Be advised there is a statutory fee due (\$.25 per page, not in excess of 9x14) for copies. For anything else, including digital formats, cost of reproduction will be charged. Deposits may be required for voluminous requests. Copy fees are to be paid for any pages required to be redacted prior to viewing a file. FOIL requests will not be processed for any person or company who fails to pay any outstanding FOIL fees due for a prior FOIL request. Copies will be prepared unless specifically requested otherwise.

SECTION 2 – TO BE COMPLETED BY AGENCY RECORDS ACCESS (FOIL) OFFICER

Receipt of this request is hereby acknowledged. Please allow twenty (20) business days for processing before contacting this office. **A copy of this form is being mailed to you indicating your request is being processed.**

_____ Date _____ Records Access Officer _____ Application Number

Records Access Officer, Inc. Village of Ocean Beach, PO Box #457, Ocean Beach, NY 11770 631 583-5940

Please Note: The Public Officer's Law requires that a municipality acknowledge receipt of a FOIL request within five (5) business days.

FOR AGENCY USE ONLY BELOW

SECTION 3 – NOTICE TO APPLICANT

DEPOSIT REQUIRED

- o A deposit in the amount of \$ _____ is required before we can continue to process your FOIL application, as it is voluminous. Please forward a check payable to "Inc. Village of Ocean Beach" in the deposit amount to Records Access Officer, PO Box #457, Ocean Beach, NY 11770. For questions, please call 631 583-5940.

RECORDS PROVIDED:

- o The records have been fully provided.
- o The records have been partially provided or redacted.
- o The document(s) you requested are available. The cost of reproduction is \$ _____. Please bring your cash, check or money order payable to the "Inc. Village of Ocean Beach" and submit it to the Village Office, PO Box #457, Ocean Beach, NY 11770.
- o Please call 631 583-5940 to schedule an appointment to view documents.
- o Redaction fee due \$ _____ at time of appointment.

RECORDS DENIED, PARTIALLY PROVIDED OR REDACTED

o Request needs to be more specific because cannot determine what record (s) you seek.	o Are trade secrets or commercial enterprise documents which If disclosed would cause in jury to the competitive position of the subject enterprise.
o Records not possessed by the Village of Ocean Beach.	o Complainant's name cannot be disclosed pursuant to the Public Officers Law Article 6A and Sec. 89-2(a).
o After diligent search, there are no known documents that are responsive to your request.	o Would endanger the life or safety of any person.
o Municipalities are not required to respond to questions or inquiries, only to provide documents.	o Municipalities are only required to search for specific documents Requested.
o Exempted by statute other than the Freedom of Information Law.	o Exempt inter-agency or intra-agency materials.
o Unwarranted invasion of personal privacy.	o Exempt examination questions or answers.
o Would impair present or imminent contract awards or collective Bargaining negotiations.	o Other
o Law Enforcement records.	

Name of Records Access Officer:	Records Access Officer's Signature:	Date:
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This Freedom of Information Request will remain on file for six (6) months from the date of final determination. Thereafter, it will be destroyed.

NOTICE: You have the right to appeal a denial of this application to Steven W. Brautigam, Clerk/Treasurer, Inc. Village of Ocean Beach, PO Box #457, Ocean Beach, NY 11770. You are entitled to an explanation of the reason for such denial in writing within ten (10) days of receipt of the appeal.

I hereby appeal: _____
Signature

Date