

**TOWN CLERK'S OFFICE  
740 W. BOSTON POST ROAD  
MAMARONECK, NEW YORK 10543**

**APPLICATION FOR COPIES OF PUBLIC RECORDS**

**I hereby apply for copies of the following record(s) with the understanding that I will pay the indicated costs of reproduction as outlined in Chapter 167 of the Code of the Town of Mamaroneck relating to inspection and copying of public records:**

**INFORMATION REQUESTED:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Date** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Please Print** \_\_\_\_\_

**Representing** \_\_\_\_\_ **Telephone #** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

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**FOR TOWN USE ONLY**

**Approved**     (if not part of an open investigation)

**Denied (for the reason(s) check below)**

- Inter or Intra-Agency Record, which is neither factual nor statistical tabulations**
- Confidential disclosure**
- Part of investigatory files**
- Unwarranted invasion of personal privacy**
- Record of which this agency is not legal custodian**
- Cannot be found**
- Record is not maintained by this agency**
- Exempted by statute other than the Freedom of Information Act**
- Other** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Title** \_\_\_\_\_ **Date** \_\_\_\_\_

**NOTICE: You have a right to appeal a denial of this application to the Supervisor. Appeals should be delivered to the Office of the Town Clerk.**