

NEW YORK STATE
LAKE GEORGE PARK COMMISSION
PO Box 749
Lake George, New York 12845

APPLICATION FOR PUBLIC ACCESS TO RECORDS

TO: The Lake George Park Commission

- I hereby request **copies** of the following records:
 I hereby apply to **inspect** the following records:

After inspection, should I desire copies of all or part of the records inspected, I will identify the records to be copied and hereby offer to pay the established fees. I understand that the Freedom of Information Law requires that an agency respond to a request within 5 days of receipt of a request. If my request appears to be extensive or fails to reasonably describe the records, please contact me in writing, by email, or by phone.

1. _____
2. _____
3. _____
4. _____

Name _____ Tel.# _____

Company _____

Mailing Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

If you prefer to receive electronic copies of these documents, please submit your email address.

E-mail: _____

FOR COMMISSION USE ONLY

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

Signature

Date

COST OF COPIES: Total Pages _____
 Less 7 -7
 Number of Pages _____
 Cost per Page X .25
 Total Cost \$_____

DENIAL OF ACCESS: I hereby certify that access to the records listed below has been denied on the grounds set forth below:

- (a) Exempted by Statute
- (b) Confidential Disclosure
- (c) Part of Investigatory Files,
- (d) Unwarranted Invasion of Personal Privacy
- (e) Other _____

	Record	Reason for Denial
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
_____		_____
Signature		Date

CANNOT BE FOUND CERTIFICATION: I certify that a proper search has been conducted for the requested records for inspection by the applicant and that the requested records listed below cannot be found or do not exist.

1.	_____
2.	_____
3.	_____
4.	_____

Signature	
Date	

NOTICE: You have the right to appeal a denial of this application to the Head of the Agency, who must fully explain the reasons for such denial in writing within 7 days of the receipt of an appeal.

I hereby appeal: _____
 signature