

CITY OF CORNING
APPLICATION FOR PUBLIC ACCESS TO RECORDS

(complete a separate form for each record requested)

TO: Records Access Officer
500 Civic Center Plaza
Corning, New York 14830

I hereby apply to obtain a copy of the following record: _____

Name Date

Representing Signature

Mailing Address and telephone number

FOR AGENCY USE	
Approved _____ # of pages	
Record not found _____	
Denied (For the reason(s) checked below)	
<input type="checkbox"/> Confidential Disclosure	
<input type="checkbox"/> Unwarranted Invasion of Personal Privacy	
<input type="checkbox"/> Record of Which This Agency is Legal Custodian Cannot be Found	
<input type="checkbox"/> Record is not Maintained by This Agency	
<input type="checkbox"/> Exempted by Statute Other Than the Freedom of Information Act	
<input type="checkbox"/> Other (specify) _____	
_____ Rose M. Blackwell, Records Access Officer	_____ Date

NOTICE: You have a right to appeal a denial of this application to the Appeals Officer of the City of Corning.

David B. Kahl, Appeals Officer
500 Civic Center Plaza
Corning, New York 14830

Who must fully explain his reason for denial in writing seven business days of receipt of an appeal.

I Hereby Appeal:

Signature Date