

**APPLICATION FOR PUBLIC ACCESS TO RECORDS  
GENESEE COUNTY**

**Freedom of Information Law ("FOIL") Application**

**To: Records Access Officer**

|                                |                         |
|--------------------------------|-------------------------|
|                                | 165 Park Road           |
| Sheriff's Office and Divisions | Batavia, New York 14020 |
| Name of Agency/Department      | Address                 |

**I hereby apply to inspect the following record(s):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|               |                 |
|---------------|-----------------|
| Signature     | Date            |
| Print Name    |                 |
| Representing  |                 |
| Telephone No. | Mailing Address |

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**For Agency/Department Use Only**

\_\_\_\_\_ Approved

\_\_\_\_\_ Number of copies are responsive to the request and a fee of: \_\_\_\_\_

A fee of .25 per page must be remitted in advance  
*(Please make checks payable to Genesee County Treasurer)*

or records available for inspection during the following:  
Office hours: \_\_\_\_\_ And days: \_\_\_\_\_

\_\_\_\_\_

|            |         |
|------------|---------|
| Department | Address |
|------------|---------|

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\_\_\_\_\_ Records of which this Agency/Department is Legal Custodian Cannot be found.

\_\_\_\_\_ Record is not maintained by this Agency/Department

\_\_\_\_\_ Receipt of request acknowledged, however, additional time is required

Number of Days \_\_\_\_\_ Reason \_\_\_\_\_

\_\_\_\_\_ Denied: (for reason(s) checked below)

\_\_\_\_\_ Unwarranted Invasion of Personal Privacy

\_\_\_\_\_ Exempted by Statute other than the Freedom of Information Act

Specify: \_\_\_\_\_

\_\_\_\_\_ Confidential Disclosure of Information of Procedures in criminal investigation

\_\_\_\_\_ Other: (Specify) \_\_\_\_\_

\_\_\_\_\_  
Signature Records Access Officer

\_\_\_\_\_  
Date

Department of: \_\_\_\_\_

**Notice**

You have the right to appeal a denial, in whole or in part, of this application to the Records Access Appeals Officer, Office of County Attorney, County of Genesee, 7 Main Street, Batavia, New York 14020

I hereby appeal:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date