



40 New Main Street  
Haverstraw, New York 10927  
Tele: (845) 429-0300 Fax: (845) 429-0353

## Application for Public Access to Records

To records access officer

I hereby apply to inspect the following records:

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- I wish to have access to these records (reserving the right to copies of any or all.)
- I wish to have copies made at 25¢ per (regular-sized) page, and agree to pay for these copies.
- I would like an estimate of the number of the pages involved in the above request prior to any copies being made.

**NOTE: Copies of Certificates of Occupancy can be obtained through the Building Department for a fee of \$50.00**

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_ Date: \_\_\_\_\_

*For Records Officer Use Only*

Sent to: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_  
*Signature*

Via Fax: \_\_\_\_\_ Regular mail: \_\_\_\_\_ Pick-up: \_\_\_\_\_ Email: \_\_\_\_\_

Denied: \_\_\_\_\_ Reason: \_\_\_\_\_