



## TOWN OF YORKTOWN TOWN CLERK

363 Underhill Avenue, Yorktown Heights, New York 10598  
Phone (914) 962-5722 x209, Email: townclerk@yorktownny.org

### *APPLICATION FOR PUBLIC ACCESS TO RECORDS*

**Please print clearly**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### **RECORDS REQUEST**

Fully describe the records you are requesting. A complete and detailed description of the records you are requesting is necessary to accurately respond to your request.

The document(s) are in the following Department(s): \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

An acknowledgement of your request will be sent to you within five (5) days of your request. Our departments will have up to twenty (20) days to research and provide the requested documents.

There is a twenty-five cents (\$.25) per page charge for each regular size (8 ½ x 11) public document copied. There will be additional charges for larger size documents, maps, tapes, disks, etc.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date