



APPLICATION FOR PUBLIC ACCESS TO RECORDS
"Freedom of Informations Law" (FOIL) Request

County of Franklin Solid Waste Management Authority
828 County Route 20
Constable, NY 12926

SECTION 1: TO BE COMPLETED BY APPLICANT

INSTRUCTIONS TO APPLICANT: Please complete Section 1 of this form. Upon completion, submit the form to the following address:

**County of Franklin Solid Waste Management Authority
828 County Route 20
Constable, NY 12926**

I wish to inspect the following record(s): If more space is necessary, you may attach additional sheets of paper.

Signature of Applicant *Printed Name* *Date* *Phone Number*

STOP HERE- FOR OFFICE USE ONLY

APPROVED *TIME:* *DATE:*

DENIED - For the reason(s) checked below:



DENIED; REASON FOR DENIAL: _____

Signature *Printed Name* *Date* *Title*

| | |
|-------------------------|-------------------|
| Request Invoice Number: | Received By: |
| Price Per Copy: | Number of Copies: |
| Amount Due: | Cash/Check: |
| Amount Received: | Disposition Date: |