

**APPLICATION FOR PUBLIC ACCESS TO RECORDS**

To: Records Access Officer  
Incorporated Village of Baxter Estates  
315 Main Street  
Port Washington, NY 11050

Date: \_\_\_\_\_  
Phone: (516) 767-0096  
Fax: (516) 767-0058  
Email: clerk@baxterestates.org

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

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

I hereby request the following documents and I understand that any copies requested are charged at a rate of \$0.25 per page.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Representing: \_\_\_\_\_

Mailing Address	City	State	Zip
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**FOR VILLAGE USE ONLY**

Records requested are available and may be inspected on or after \_\_\_\_\_.

Records requested are NOT available because:

- \_\_\_\_\_ a) They are not public record
- \_\_\_\_\_ b) Records are not maintained by the Village of Baxter Estates
- \_\_\_\_\_ c) No record of the requested material can be found
- \_\_\_\_\_ d) Material has been destroyed compliant with State Regulations
- \_\_\_\_\_ e) Exempt by statute other than the F.O.I.L. Act

Signature	Title	Date
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Notice to Applicant: You have the right to appeal a denial of this application to the Board of Trustees of the Village of Baxter Estates who must explain their reasons for such denial in writing within seven days of receipt of an appeal.