



**SCHOHARIE COUNTY**  
Request for Access to Public Records  
PO Box 429  
Schoharie, NY 12157

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**I HEREBY APPLY TO INSPECT THE FOLLOWING RECORDS:**

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Requested By (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Mailing Address \_\_\_\_\_ Date \_\_\_\_\_

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For Agency Use Only

APPROVED \_\_\_\_\_

DENIED (reason(s) checked below)

- \_\_\_\_\_ Confidential Disclosure
- \_\_\_\_\_ Part of Investigatory Files
- \_\_\_\_\_ Unwarranted invasion of personal privacy
- \_\_\_\_\_ Record which this agency is legal custodian cannot be found
- \_\_\_\_\_ Record is not maintained by this agency
- \_\_\_\_\_ Exempted by statute other than the Freedom of Information Act
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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NOTICE: You have a right to appeal a denial of this application to the County Attorney, who must fully explain his/her reasons for such denial in writing seven days of receipt of an appeal.

I HEREBY APPEAL: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_