

UNIVERSITY POLICE DEPARTMENT
STATE UNIVERSITY OF NEW YORK AT NEW PALTZ
1 HAWK DRIVE NEW PALTZ, NY 12561
(845) 257-2222 OFFICE
(845) 257-3334 FAX



TO REQUEST RECORDS
(FOIL REQUEST)

RE: Freedom of Information Law Request

Police Record Requests submit to;

UNIVERSITY POLICE
State University of New York at New Paltz
1 Hawk Drive New Paltz, NY 12561-2443

(845) 257-3802 for more information

Dear Records Access Officer:

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request records or portions of thereof pertaining to (or containing the following)

If my request appears to be extensive or fails to reasonably describe the records, please contact me by email or phone at _____.

If there are any fees for copying records requested, please inform me before filling the request (or: please supply the records without informing me if the fees are not in excess of \$_____).

As you know, the Freedom of Information Law requires that an agency respond to a request within **five business days of receipt of a request.**

Therefore, I would appreciate a response as soon as possible and look forward to hearing from you.

If for any reason any portion of my request is denied, please inform me of the reasons for the denial in writing and provide name and address of the person or body to whom an appeal should be directed.

If you are requesting that the records be sent to you via mail please provide a Self-addressed, stamped envelope.

Records cannot be faxed

Sincerely,

Signature: _____ Print Name: _____

Address: _____

Phone: _____