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RECEIVED: _____

APPLICATION TO EXAMINE PUBLIC RECORDS

Section _____ Block _____ Lot _____

Address: -----

I hereby apply to inspect the following record: (Please be very specific)

1. _____
2. _____
3. _____
4. _____
5. _____

Applicant Name: (Please Print)

Applicant Signature:

Company Name: _____

Address: _____

Phone: _____ Date: _____

FOR DEPARTMENT USE ONLY

Approved

Record does not exist

Denied (for reason (s) checked below):

- Unwarranted Invasion of Personal Privacy**
- Part of Investigatory Files**
- Confidential Disclosure**
- Exempted by Statute other than Freedom Of Information Act**
- Records cannot be found**
- Record is not maintained by this agency**
- Would endanger the life or safety of any person**
- Other (Specify) _____**

Signature: _____ **Title:** _____ **Date:** _____

Comments: _____

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