FOIL Request Blotter # (Office Use)	Officer

Records Access Officer

Village of Chester Police Department
47 Main St.
Chester, NY 10918

Date:_____

Under the provisions of the Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request a copy of: **(describe as accurately and specifically as possible the record or records you want, and provide all the relevant information you have concerning them).**

If there are any fees for copying the records I am requesting, please inform me before you fill the request. **THE VILLAGE MAY REQUIRE THAT PAYMENT BE MADE IN ADVANCE.**

If all or any part of this request is denied, please cite the reason(s) which you think justifies your refusal to release the information. As you know, the Freedom of Information Law requires that an agency respond to a request within five business days of its receipt. Also, please inform me of your agency's appeal procedure.

In order to expedite consideration of my request, I am enclosing a copy of: **(some document of identification)**

Thank you for your prompt attention to this matter.

Sincerely,

_____
(signature)

_____
(print name)

_____
(address)

_____
(city, state, zip)

_____
(phone)

OFFICE USE ONLY