

TO: RECORDS ACCESS OFFICER APPLICATION FOR PUBLIC ACCESS TO RECORD PICKED UP: \_\_\_\_\_

I hereby apply to receive a copy of the following record (One Application for EACH record):

It may take up to 5 business days to respond to request.

TODAY'S DATE: \_\_\_\_\_

Accident Reports may take up to 10 days after occurrence to become available.

ACCIDENT REPORT (MV-104) ← CHECK ONE BOX →  POLICE REPORT/INCIDENT CARD

Please **PRINT** ALL information, **sign** and **SUBMIT GOVERNMENT ISSUED PHOTO IDENTIFICATION WITH THIS REQUEST.**

Date of accident or Incident: \_\_\_\_\_ Complaint # (if known): \_\_\_\_ - \_\_\_\_\_

Name on Report: \_\_\_\_\_ Address of **Incident**: \_\_\_\_\_

\_\_\_\_\_  
Name of person requesting report      Relationship to parties in report      (      )  
phone number

**How would you like to receive information (check one)**

E-MAILED – E-mail Address: \_\_\_\_\_

Fax - Fax number w/area code: \_\_\_\_\_

U.S. Mail – Address: \_\_\_\_\_

Pick up at Police Station - Records to be picked up will only be held for 30 days.

**SIGN YOUR NAME:** \_\_\_\_\_

**FOR TOWN USE ONLY**

APPROVED

DENIED FOR THE REASON(S) CHECKED BELOW:

CONFIDENTIAL DISCLOSURE       PART OF INVESTIGATORY FILE       UNWARRANTED INVASION OF PERSONAL PRIVACY  
 RECORD OF WHICH THIS OFFICER IS LEGAL CUSTODIAN CANNOT BE FOUND       EXEMPTED BY STATUTE OTHER THAN THE FREEDOM OF INFORMATION ACT

OTHER (SPECIFY) \_\_\_\_\_

SIGNATURE

TITLE

DATE

**NOTICE TO REQUESTOR:      YOU HAVE A RIGHT TO APPEAL A DENIAL OF THIS APPLICATION**

Submit a written request to:

LANCASTER TOWN ATTORNEY, 21 CENTRAL AVE., LANCASTER, NY 14086 716-684-3342

WHO MUST EXPLAIN HIS REASON FOR SUCH DENIAL IN WRITING SEVEN (7) DAYS OF RECEIPT OF AN APPEAL.