



# INC. VILLAGE OF SOUTH FLORAL PARK

388 ROQUETTE AVENUE  
SOUTH FLORAL PARK, NEW YORK 11001

[www.southfloralpark.org](http://www.southfloralpark.org)

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## Mayor

Porscha Lyons

Mary Long  
Administrator/Clerk-Treas.

## Trustees:

Jennifer Bellamy  
Randolf Jacques  
LeRoy Graham, Jr  
Virginia Salvatore

Christopher Prior, Esq.  
Village Attorney

### FREEDOM OF INFORMATION LAW (FOIL) REQUEST

A maximum fee of \$0.25 per page will be charged for each copy if unbound. A proportionate fee will be charged for other copies.

I hereby apply to inspect the following record(s) of the \_\_\_\_\_ (name of department)

Name: \_\_\_\_\_

Representing: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_ Telephone No. \_\_\_\_\_

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Approved: \_\_\_\_\_

Denied: (for reason(s) checked below) \_\_\_\_\_

- Confidential disclosure
- Part of investigatory file
- Unwarranted invasion of personal privacy
- After a diligent search, record: cannot be found
- Record does not exist
- Record is not maintained by this agency
- Exempted under the Freedom of Information Act
- Exempted by statute or case law

Signature: \_\_\_\_\_ (Freedom of Information Officer) Date: \_\_\_\_\_

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Note: You have the right to appeal a denial of this application within seven days of receipt to the Village Administrator who must fully explain his/her reasons for support of such denial in writing. I hereby request an appeal:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Address: \_\_\_\_\_