



Public Health  
Prevent. Promote. Protect.

## FREEDOM OF INFORMATION LAW (FOIL) REQUEST

If you wish to access a record under the **Freedom of Information Law (FOIL)**, you must make your request in writing. Please be as specific as possible in describing the record(s) in which you are interested. Within five business days of the receipt or a written request, we will acknowledge that we received the request. It may take approximately 30 – 60 days to complete the usual request or determine the availability of records in response to a request. Print & mail or fax to us, or 'save' and email to [health@clintoncountygov.com](mailto:health@clintoncountygov.com)

RECORDS ACCESS OFFICER: Clinton County Health Department, Environmental Health & Safety Division  
133 Margaret Street  
Plattsburgh, NY 12901  
PHONE (518) 565-4870 FAX (518) 565-4843

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD(S):

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### APPLICANT INFORMATION

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

(Please print)

Organization \_\_\_\_\_ Phone No. \_\_\_\_\_

Mailing Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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### FOR AGENCY USE ONLY

- APPROVED
- DENIED (for the reason(s) checked below)
  - Confidential Disclosure
  - Part of Investigatory Files
  - Record Is Not Maintained By This Agency
  - Unwarranted Invasion of Personal Privacy
  - Record of Which This Agency is Legal Custodian Cannot Be Found
  - Exempted by Statue Other than the Freedom of Information Act
  - Other \_\_\_\_\_

\_\_\_\_\_  
Signature Title Date

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NOTICE: YOU HAVE THE RIGHT TO APPEAL A DENIAL OF THIS APPLICATION TO:  
Chairman, Clinton County Legislature, 137 Margaret Street, Plattsburgh, NY 12901,  
who must fully explain his reasons for such denial, in writing, seven days from receipt of an appeal.

I HEREBY APPEAL:

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