Village of Montour Falls 408 West Main Street P.O. Box 812 Montour Falls, NY 14865

FREEDOM OF INFORMATION REQUEST

Dear Village of Montour Falls:

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request the following records or portions thereof pertaining to
If there are any fees for copying the records requested, please inform me before filling the request. (Check here if electronic copies are preferred)
As you know, the Freedom of Information Law required that an agency respond to a request within five business days of receipt of a request. Therefore, I would appreciate a response as soon as possible and look forward to hearing from you shortly.
If for any reason any portion of my request is denied, please inform me of the reasons for the denial in writing and provide the name and address or body to whom an appeal should be directed.
Signed
Print Name
Address
E-Mail Address (for electronic copies)
Date