



Harriman Police Department

Patrick Tenaglia
Chief of Police

1 Maple Avenue
Harriman, New York 10926
chief@villageofharriman.org

845-782-6644
FAX: 845-782-7735

Foil Request Form **For Persons Seeking Existing Records**

All Freedom of Information Law Requests must be made in writing. Please complete this form and present it to the desk officer or mail to:

Harriman Police Department
1 Maple Avenue
Harriman, New York 10926
Attn: Chief of Police

Within five business days this agency will respond to your request for records with a written acknowledgement of the receipt of such request and a statement of approximate date, which shall be reasonable under the circumstances of the request, when such request will be granted or denied. There will be a fee of \$.25 per page. Paid by cash, check or money order.

Requester Information:

Name: _____ Date: _____ Telephone #: _____

Mailing Address: _____

Your Firm/Organization: _____

Party You Represent: _____

Your request should identify or describe the records sought with sufficient specificity to enable us to ascertain and locate the records being requested. Please fill in **all known or applicable** information.

Incident/Case Number: _____ Type of Incident: _____

Date and Time of Incident: _____ Location of Incident: _____

Name of Individual(s) Involved: _____

Description of Records Sought: _____

Date Received: _____ Received By: _____ Title: _____

By: Walk In Mail Fax

Records accessible under FOIL are made available to any person without regard to status or interests