COUNTY OF ONONDAGA

Office of the County Executive

421 Montgomery Street, 14th floor Syracuse, New York 13202 Tel: (315) 435-3516 Fax: (315) 435-8582

FOIL Requests

To make a request for records under the Freedom of Information Law (FOIL), please use the **Application for Public Access to Records** online form to request records in an electronic or paper format or download and complete the Application for Public Access to Records hard copy form and return it to the Records Access Officer or fax it to (315) 435-8582.

When you submit this form, FOIL allows the County five (5) business days to make the record available, deny access to the record with reason, or acknowledge receipt of your request and inform you of the timeframe required to respond to your request.

To read the complete FOI law, please click here.

COUNTY OF ONONDAGA

Application for Public Access to Records

The Freedom of Information Law (FOIL) allows an individual to request existing public records from the agency responsible for maintaining those records. The County of Onondaga has a designated Records Access Officer that is responsible for accepting and responding to FOIL requests.

To make a request for existing public records, please complete the electronic form or complete the hard copy form at the bottom of the page and return it to the Records Access Officer of the County of Onondaga. If the records exist in an electronic format, you will be provided with the records requested in an electronic format unless otherwise requested below. If the records do not exist in an electronic format, the Records Management Officer will contact you to inform you how you can obtain a copy of the requested records and the fee for those copies or where you can inspect the records without charge. If the document exists in both electronic and hard copy, the County reserves the right to determine in which format the records will be made available.

When you submit this form, FOIL allows the County five (5) business days to make the record available, deny access to the record with reason, or acknowledge receipt of your request and inform you of the timeframe required to respond to your request.

To read the complete FOI law, please click here.

To the Records Management Officer:

I hereby apply to inspect the following specific record: (Please limit to 1500 characters)

Enter a subject for your request:

Your Name:

Your Address:

E-mail Address:

Preferred Format:

Disclaimer: Read Before Submitting:

- Onondaga County will reply to all requests within five (5) business days. You must white list or allow the email address of the Records Management Officer to ensure that you receive the response. You will receive a dated copy of the request to the email address you provide above.
- The County of Onondaga is not responsible if you provide an incorrect, nonworking, or invalid email address. The County of Onondaga will take no further action if the response to your email address bounces.
- Your email account must be capable of accepting files up to 10mb in size. The County of Onondaga will not provide electronic records over 10mb in size through email. If the records are over 10mb in size, you will have the option to obtain a hard copy, if available, or a CD-ROM disc with the files at your cost per copy or per disc.
- I certify that I am the individual above and that any false representation of myself as another person is a crime.
- The County of Onondaga is under no obligation to create records to fulfill your request. If the information you have requested exists in a database but there is no report available to obtain that information, the FOI Law does not require the County of Onondaga to create a report to suit your request. Additionally, if the information requested is currently available in any manner on the County's website, you will be directed to the location on the County's website where the information appears.

- For your protection and security, your IP address will be recorded.
- Current fees for reproduction are \$.25 per printed page not in excess of 9" x 14", \$5.00 per CD-ROM, or the <u>actual cost</u> of reproducing any other record.

Do you agree to the conditions to submit a FOIL request electronically (select one)

Please confirm your email address:

(County Seal) ONONDAGA COUNTY Records Access Officer Phone: (315) 435-3516 http://www.ongov.net

Application for Public Access to Records

The Freedom of Information Law (FOIL) allows an individual to request existing public records from the agency responsible for maintaining those records. Onondaga County through its designated Records Access Officer is responsible for accepting and responding to FOIL requests. To make a request for existing public records, please complete this form and return it to the Records Access Officer or complete an electronic form at <u>http://www.ongov.net.</u> to request records in an electronic format.

When you submit this form, FOIL allows the County five (5) business days to make the record available, deny access to the record with reason, or acknowledge receipt of your request and inform you of the timeframe required to respond to your request. Read the complete FOI Law online at http://www.ongov.net.____.

TO:	Records Access Officer	DATE:
	Onondaga County Dept. of	

I hereby apply to inspect the following specific record:

Your Name:	Signature:	
Your Address:		_
Your Email Address:		
If provided, you will be notified by	email.	

	For Agency Use Only (Departmental Recommendation)			
[] Police [] F	ire [] Inspection Se	rvices [] Other:	[] Other:	
We Recommend:		[] Disapproval ot be found [] Record is not	maintained	
Comments :				
Signed	Title	Date		
•••••		For Agency Use Only (Disposition of Request)		
	h this agency is legal custo naintained by this agency			
Records Managem	ent Officer	Date		

YOU HAVE THE RIGHT TO APPEAL A DENIAL OF THIS APPLICATION. SUBMIT APPEALS IN WRITING

APPLICATION FOR PUBLIC ACCESS TO RECORDS "Freedom of Information Law" (FOIL) Request

(COUNTY SE	AL)		
	ECORDS ACCESS OFFICER DATE: RTMENT (DIVISION):		
NAME (Please print)	Mr./Mrs. Ms./Miss	PHONE NUMBER	
BUSINESS NA	AME:		
MAILING AD	DRESS:		
	ct the following record(s): (PLE	EASE FULLY IDENTIFY)	
SIGNATURE:	{STOP HERE – FOR (
	- You may see and/or copy this (t TIME:	hese) record(s) as follows: PLACE:	
[] Co [] Par [] Un [] Rea [] Exe [] Inte [] Re [] Tap	cord is not maintained by this age empted by statute other than the Law § 87.2(a) er-agency or intra-agency records or final agency policy or determine cord to which this agency is legal	officers Law §87.2(e) privacy – Public Officers Law §87.2(b) ncy – Public Officers Law §86.4 Freedom of Information Law – Public Officers that are not statistical data, instructions to staff inations – Public Officers Law §87.2(g) custodian cannot be found exempt without a court order – County Law	

SIGNATURE (Records Access Officer)

Price per copy: Number of Copies: Amount Due: Received by: Amount received: Cash / Check / Money Order:

You may appeal a denial in writing within 30 days. Submit your appeal to: CMP, Esq. Appeals Officer Onondaga County Civic Center – 10th floor 421 Montgomery Street Syracuse, NY 13202