MICHELLE STEPHENS
Town Clerk/Tax Receiver

KATHY DIOMEDE
Deputy Town Clerk

AMY CARGAIN
Deputy Town Clerk

SAMANTHA MARINACE
Clerk Administrator

TOWN OF PUTNAM VALLEY

TOWN CLERK'S OFFICE

PLEASE EMAIL REQUEST TO: MSTEPHENS@PUTNAMVALLEY.GOV

REQUEST FOR INSPECTION/COPY OF RECORDS (FOIL FORM)

PLEASE INDICATE HOW YOU WOULD PREFER YOUR DOCUMENTS: PRINTED_____ EMAILED_____

DATE OF REQUEST: _____

Name (Print): _____ Day Phone: _____
Address of Applicant: _____
City/Town/Village (State) (Zip): _____

Email Address: _____

There will be a charge for copies being picked up at Town Hall. The copies provided will cost twenty-five (25) cents for an 8-1/2 X 11 page and fifty (50) cents for an 11 X 14. **If picking up, your total is $_____**

Address or **Parcel ID** of records requested: _____

Please **SPECIFY** the record(s) requested:

_____
_____
_____
_____

THIS SECTION FOR AGENCY USE ONLY

_____**APPROVED** Attached are copies of the records you requested. Date of approval: _____

_____**DENIED** for the following reason(s): _____

Date of denial: _____

_____ _____ _____
Name/Signature of Person Approving or Denying Application **Title** **Date**

NOTICE: An acknowledgement to your request will be provided within (5) business days. A standard turnaround time for requested records is (20) business days. You have the right to appeal a denial of this application in writing to the Town of Putnam Valley Town Board within 30 days of the denial. The Putnam Valley Town Board will have ten business days after the receipt of your appeal to respond to you in writing.
Town Board
265 Oscawana Lake Road
Putnam Valley, NY 10579