

Red Hook Public Library
Freedom of Information Law (FOIL) Policy

The Library Director will serve as the Information Officer.

Requests for records should be made using the attached form, and be submitted in one of the following ways. Forms may be obtained on www.redhooklibrary.org , via email, or at the front desk. If you are not able to use the form, you must provide the same information orally.

- By mail to
Library Information Officer
Red Hook Public Library
7444 S. Broadway
Red Hook, NY 12571
- By email to
• director@redhooklibrary.org
- By phone to the Director at 845-748-3241
- In person to the Director at the Library during regular library hours

The Information Officer will respond to requests within 5 working days. In some cases an additional 15 days will be necessary to locate records. In such a case, you will be informed of the need for more time.

If a FOIL request is denied by the Information Officer you may appeal to the Board of Trustees within 30 days using the attached appeal form. If it is denied by the Board of Trustees, you will receive a written explanation within 10 days of denial and a copy of the denial will be sent to the New York Committee on Open Government (<https://opengovernment.ny.gov>).

Records will only be copied in standard sizes up to 9" x 14". A charge of \$0.25/page applies for copied records. An additional \$1.00/page applies for certified records. If records preparation takes more than two hours of time, there may be a charge commensurate with the hourly rate of the staff member preparing the FOIL request.

You may arrange a time to examine records at the library by speaking to the Director. A staff member designated by the Director must be present at all times while records are being examined.

Records will not be emailed. Records that exist only electronically will need to be printed and the above photocopying charges will apply.

Information on Freedom of Information Law can be obtained from the NY Committee on Open Government.

**Red Hook Public Library
FOIL Request**

To: Library Director/Information Officer

Date: _____

Name (print): _____

Signature : _____

Address: _____

Phone: _____

Please describe records requested including dates, titles, content, and types of records.

Choose one:

I am requesting an appointment to inspect the records at Red Hook Public Library.

I am requesting copies of the requested records. I understand that the fees are \$0.25 per page for requested records, and \$1.00 per page for certification of records.

As per the Freedom of Information Law, Red Hook Public Library must answer your request within five days of receipt of your request. We will call or write if there is a problem with your request. Should your request be denied, we will send you a letter explaining why your request was denied. Denied requests may be appealed to the President of the Board of Trustees if you believe you were unfairly denied access to the requested records.

Space below is for Library use.

Date of Decision:

Approved Denied Reference #: _____

If denied, reason:

**Red Hook Public Library
Freedom of Information Law (FOIL) Appeal**

To: President, Red Hook Public Library Board of Trustees

Date: _____

Name (print): _____

Signature: _____

Address: _____

Phone: _____

I hereby appeal the denial of access regarding my request, which was made on ___/___/___ (date) and sent to _____. Reference #: _____

The records that were denied include:

As per the Freedom of Information Law, the President of the Board of Trustees must answer your request within ten days of receipt of your request. Should your request be denied again, we will send you a letter explaining why your request was denied. In keeping with New York State law, a copy of your appeal and the resultant verdict will be sent to the Committee on Open Government, Department of State, 41 State Street, Albany, New York 12231.

Space below is for Library use.

Date of Decision:

Approved Denied

If denied, reason:

CERTIFICATION OF RECORD

STATE OF _____

COUNTY OF _____

REF NUMBER _____ DATE _____

RECORD CUSTODIAN _____

LOCATION Red Hook Public Library, 7444 S. Broadway, Red Hook, NY 12571

I, _____, the Record Custodian of the aforementioned location, do hereby swear and attest that the following is true to the best of my knowledge:

That the attached records are in reference to _____ only.

That I am certified and authorized to release the attached records to _____ solely for the purpose of _____

That the records were made on or close to the date of the event, transaction, or agreement.

That the records were made and kept in the course of normal business practice, and that they were made and kept according to filing and record-keeping standards. It is the regular practice for the business to keep records of this nature for this period of time.

Record Custodian Signature

Date