



Policy Statement: This policy provides information about how members of the public can access records of the Saranac Lake Free Library.

Resources

- New York State Freedom of Information Law (Article 6, Sections 84-90)
- New York State Committee on Open Government

The Policy:

The Saranac Lake Free Library, as a New York State association library, complies with the New York Freedom of Information Law (Public Officers Law, Article 6, Section 87, Freedom of Information Law).

The Library Director will be the Records Access officer.

A person may request information and records available to the public in the following manner:

- Use the Freedom of Information Law request form (attached)
- Direct the request to the following address:
Records Access Officer
Saranac Lake Free Library
109 Main Street
Saranac Lake, NY 12983
- Specify the records requested to be disclosed for inspection or to be copied. If you desire that any records be certified, you must specify which ones.
- Reimburse the library our actual costs for reproducing and certifying (if requested) the records. These fees are: \$0.25 per page for employee-copied records, and \$1.00 per page for certification of records.
- Records may be available for inspection in person, by appointment, at no cost. An employee must be present throughout the inspection.

The Records Officer will respond to a written request within five working days or sooner if possible. An extension of an addition 15 working days may be necessary to properly respond and if so, the reason for this extension will be explained.

An appeal about the decision of the FOIL officer may be made to the President of the Board of Trustees, using the Freedom of Information Law Appeal form (attached).



The full text of the FOIL law, guidance issued by the New York State Committee on Open Government, and other information about the law can be found on the Committee's website at <http://www.dos.ny.gov/coog/index.html>.

Saranac Lake Free Library
109 Main Street
Saranac Lake, NY 12983
(518) 891-4190
<http://www.slfl.org>



Freedom of Information Law (FOIL) Request

To: Director, Saranac Lake Free Library

Date ____/____/____

Name (*please print*) _____

Signature _____

Address _____

Phone _____

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to (or containing the following)

(Please attempt to identify the records in which you are interested as clearly as possible).

If there are any fees for copying the records requested, please inform me before filling the request, or you may supply the records without informing me if the fees are not in excess of _____.

As per the Freedom of Information Law, the Saranac Lake Free 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 ____/____/____

Decision (circle): **Approved** **Denied**

If denied, please state why _____

Saranac Lake Free Library
109 Main Street
Saranac Lake, NY 12983
(518) 891-4190

<http://www.slfl.org>



Freedom of Information Law (FOIL) Appeal

To: President, Saranac Lake Free Library Board of Trustees

Date ____/____/____

Name *(please print)* _____

Signature _____

Address _____

Phone _____

I hereby appeal the denial of access regarding my request, which was made on ____/____/____ and sent to _____.

The records that were denied include:

(Please attempt to identify the records in which you are denied access to as clearly as possible).

**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 the verdict on your appeal will be sent to the Committee on Open Government, Department of State, 41 State Street, Albany, New York 12231, regardless of the verdict.**

Space below is for Library use.

Date of Decision ____/____/____

Decision (circle): **Approved** **Denied**

If denied again, please state why _____