



APPLICATION FOR ACCESS TO RECORDS

(See Instructions)

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• TO THE ONONDAGA COUNTY WATER AUTHORITY

Are you requesting a list of private names and addresses or unredacted documents containing such names and addresses?

- Yes* No

*If you answered yes, you must complete the Affidavit of Purpose before your request will be considered.

I hereby apply to:

- Inspect the following records under the provisions of the Freedom of Information Law. If after inspection, should I desire copies of all or part of the records inspected, I will identify the records to be copied and hereby offer to promptly pay the established fees. (Cost of reproduction or 25¢ per page as applicable).

- Receive copies of the following records under the provisions of the Freedom of Information Law: _____

* Prepayment shall be required for all requests

Name (Print or type) _____ Telephone No. _____

Attention of _____ E-Mail Address _____

Mailing Address _____

Signature _____ Date _____

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[For Authority Use Only]

• TO THE APPLICANT

Records Provided

- The reproduction costs for the records provided are \$ _____
- Records have been (partially, fully) provided. (If not provided, date when records are expected to be fully provided: _____)

Records Not Available

- Records cannot be found after diligent search
- The Authority is not the custodian for records indicated

Records Denied

Access to the records – or part of the records –has been denied to the applicant for the reasons(s) checked below:

- | | |
|---|--|
| <p><input type="checkbox"/> Specifically exempt under federal or state statute</p> <p><input type="checkbox"/> Unwarranted invasion of personal privacy</p> <p><input type="checkbox"/> Would impair present or imminent contract awards or collective bargaining negotiations</p> <p><input type="checkbox"/> Are examination questions or answers</p> <p><input type="checkbox"/> Are inter-agency or intra-agency materials that are not:</p> <ul style="list-style-type: none"> • statistical or factual tabulations or data • instructions to staff that affect the public • final agency policy or determinations; or • external audits, including but not limited to audits performed by the NYS Comptroller and the federal government <p><input type="checkbox"/> Are trade secrets or would cause substantial injury to a commercial enterprise</p> | <p><input type="checkbox"/> Could endanger the life of any person</p> <p><input type="checkbox"/> Are compiled for law enforcement purposes and if disclosed would:</p> <ul style="list-style-type: none"> • interfere with law enforcement investigations or judicial proceedings • deprive a person of the right to a fair trial or impartial adjudication • identify a confidential source or disclose confidential information relating to a criminal investigation, or • reveal criminal investigative techniques or procedures <p><input type="checkbox"/> Would jeopardize an agency's capacity to guarantee the security of its information technology assets (such assets encompassing both electronic information systems and infrastructures)</p> |
|---|--|

Identification of records withheld (attach listing if additional space is required) and/or explanation if appropriate:

Signature of FOIL Officer _____ Title _____ Date _____



AFFIDAVIT OF PURPOSE

STATE OF NEW YORK)
COUNTY OF _____) SS:

_____, being duly sworn, deposes and says the following is true:

1. I am submitting a Freedom of Information Law request (“FOIL request”) to the Onondaga County Water Authority (“Authority”) pursuant to New York State PUBLIC OFFICERS LAW.
2. My FOIL request involves a list of names of members of the public and their home addresses, and/or records containing such names and home addresses that could be used to compile such a list.
3. I understand that pursuant to New York State PUBLIC OFFICERS LAW, the Authority has the right to deny my FOIL request if it involves a list of names and addresses of members of the public and such list would be used for commercial or fund-raising purposes. See PUBLIC OFFICERS LAW § 89(2)(b)(iii).
4. I understand that pursuant to New York State PUBLIC OFFICERS LAW, the Authority also has the right to deny my FOIL request even if I do not request a list of names and addresses per se if my request for records would be used to develop a list of names and addresses to be used for commercial or fundraising purpose. See Scott, Sardano & Pomeranz v. Records Access Officer of Syracuse, 65 N.Y.2d 294, 491 N.Y.S.2d 289 (1985).
5. I will not use the requested (i) list of names and addresses of members of the public and/or (ii) records containing such names and addresses, for commercial or fundraising purposes or to develop a list of names and addresses of members of the public to be used for commercial or fundraising purposes.
6. Note that in accordance with New York State PENAL LAW, it is a crime to knowingly file a false statement with a public benefit corporation, such as the Authority. I understand that by filing this affidavit, the Authority may act in reliance on the veracity of my statements. See PENAL LAW § 175.35.

SIGNATURE: _____

NAME: _____

SWORN TO BEFORE ME THIS
____ DAY OF _____, 20__
